

inspired us: Thanks!

This guide was created by Morgan M Page at The 519 Church Street Community Centre. But we’d like to take a moment to thank all those folks and projects that inspired us! Firstly, special thanks to Christina Strang, creator of the original The Happy Transsexual Hooker – Canada’s first safer sex resource for trans sex workers and trans women. We’d also like to thank the Gay/Bi/Queer Trans Men’s Working Group and everyone else involved with the creation of PRIMED: The Back Pocket guide for Transmen & The Men Who Dig Them. These two guides were the primary inspiration for this project, and we owe them so much! Another source of amazing inspiration was the Safer Sex for Transguys: a Guide for the Whole Spectrum guide created by James Cullen. Special thanks to everyone who looked over the guide, edited it, or gave suggestions, including Aurora Jade Pichette, Kyle Scanlon, Kate N., Danielle W., Rebecca Hammond, and Christina Strang.

Thanks to our models Danielle W., Liam S., and Julissa P.

Photography by Remi Dietrich.


+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 HIV/STI status? ............................................................... 7
  +Wrap it Up: Negotiating Condoms and Dams
    with Lovers and Clients........................................................................... 8

fuck me: Tips for Safer Sex........................................................................... 9
  + Fucking Ass and Vag ............................................................................... 9
  + Rimming ................................................................................................. 11
  + Scissoring .............................................................................................. 11
  + Sucking and Licking .............................................................................. 11
  + Fisting .................................................................................................... 12
  + Fingering and Handjobs ....................................................................... 12
  + Toys ........................................................................................................ 13
  + Lubricants ............................................................................................... 13

doctors & me: Talkin’ to your Doc................................................................ 15

surgery & me: Info for Trans Women who have had genital surgeries ...... 16
  + What Can I Do? What Can’t I Do?.......................................................... 16

inject me: Needles, Silicone, and STIs ......................................................... 19

pay me: Additional Safety Tips and Tricks for Trans Sex Workers.............. 20

break it down: Sexually Transmitted Infections ........................................ 22
+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 our lovers and clients! 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 guy 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/genderqueer/genderfluid/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, clitasaurus-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 men’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 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 that I’m Trans?**

Figuring out when to tell a potential sex partner, lover, or client 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 a potential partner 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 now is the right time to disclose: Can you easily leave where you are? Are you in a place where you feel comfortable and safe?

**What about my HIV/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 whether to disclose your HIV or STI status and how/when to do that. Life can be so complicated! The same rules apply for disclosing HIV/STI status though: Can you easily leave the room/situation? Are you in a place where you feel comfortable and secure?
WRAP IT UP: Negotiating Condoms and Dams with Lovers and Clients

If you want to protect yourself and your lovers/clients against HIV and other STIs, you’ll need to use condoms, dental dams, and/or gloves! But sometimes getting a lover/client 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/gloves. It’s about your health and theirs.

BE FIRM about it! Stop sex if you have to. Some clients and some lovers might try to tell you that they don’t want to use condoms/dental dams/gloves for any number of reasons, including:

“They don’t fit!” Condoms come in larger sizes, however regular condoms can be stretched to fit over an adult's head, so this reason is total BS!

“I’m allergic to latex!” That’s ok because you can always use 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!” Most people who say this have never been tested for STIs or HIV. And even if they show you a transcript of their latest HIV test or STI screening, if they’ve had sex since then, you could still be at risk!

“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/glove.

No matter what their reason is, your health is worth more than the sex or money! If a client or lover refuses to use condoms, try suggesting a handjob instead of a blow job or anal/vaginal sex. If they still refuse, end the session, give them back some or all of their money (if they are a client), and get out of there!

For some people, negotiating safer sex can be about more than just HIV and STI prevention. It can also be about self-esteem and personal boundaries. For some of us, we 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/lovers/clients 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/lover/client insists on using condoms or dental dams for particular sex acts, make sure to respect their boundaries, just as you’d want yours to be respected.

+fuck me:
Tips for Safer Sex

THE BASICS

Here’s what it comes down to: body fluids can transmit HIV and STIs (sexually transmitted infections)! This means cum/semen, blood, pre-cum, vaginal fluids including menstrual blood, and breast milk! Some things, like herpes, can be transferred just by skin-on-skin contact, so always make sure to look carefully at your partners’ or clients' genitals and mouths.

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! 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, 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, which will help prevent you and your partner from getting HIV or an STI.
• Barebacking (not using condoms) is popular in gay porn, but beware! This is the most high risk way to have sex! Respect your body and your partner’s body by using condoms and lube!
• If you’re fucking a cis woman or a trans man with your strapless, remember that you could still get them pregnant! So wear a condom if you aren’t planning on getting your partner pregnant.
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 the usual suspects: herpes, gonorrhoea, Chlamydia, and Hep B. Don’t worry, though, you can suck and lick to your heart’s delight with these simple tips:

• Use a condom for cocks and strapless! Put some lube on the inside of the condom for extra sensation! Trans men who have had phalloplasty should also use condoms!

• Make sure to try to avoid swallowing cum and precum, if you decide to go without a condom.

• Use a dental dam for vag and t-dicks. 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, 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. You can also use non-microwaveable saran wrap!

• Don’t floss or brush your teeth for at least 30 minutes before sucking or licking. Flossing and brushing can make tiny cuts inside your mouth which increase your risk of spreading or getting HIV or STIs.

RIMMING

Eating ass can be super hot. And while it’s a low risk for spreading HIV, rimming is a high risk for spreading gonorrhoea, herpes, syphilis, and Hep A and Hep B. But don’t worry! You can reduce your risk when rimming by:

• Washing the area! Plain old soap and water. Careful not to get the soap up your butt, though! It’s an irritant! Ouch!

• Using a dental dam can really help! If one isn’t available non-microwaveable saran wrap works just as well. Or, cut the ends of a condom off, and then cut down one side of it to create a large square that will work just like a dam!

• Some people like to douche before getting rimmed. This isn’t recommended, because it can increase your risks of contracting an STI.
**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 SRS. This is a low risk for spreading HIV, but can be a risk for spreading syphilis, gonorrhoea, and herpes! There are a couple of different ways to reduce your risk, though:

- Check your partner's genitals for any sores, open cuts, or abrasions.
- Try wearing underwear and/or pants while tribbing to reduce contact with fluids.
- Using non-microwaveable saran 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 SRS should check out our section on genital surgeries (page x) before being fisted. For the person receiving, fisting can increase your risks for spreading or getting HIV or STIs during other sex acts for up to two weeks after being fisted. For the person doing the fisting, this is a very low risk for HIV transmission, as long as you have no cuts or sores on your hand.

- 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.
- Make sure to use condoms when you get fucked for at least two weeks after 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, including herpes!

- Wash your hands before sex! Soap and water, nice and easy.
- Check to make sure you don't have any open cuts or abrasions! Rubbing your hands with hand sanitizer, lemon juice, or alcohol should make it obvious if you’ve got any little cuts.
- Wear gloves! Especially if you're penetrating their 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.

**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 saran wrap over it!
- Change the condom or non-microwaveable saran wrap between holes and between partners! This will prevent spreading bacteria and STIs between body parts and partners!
- Clean the toy after using it! Silicone dildos should be boiled after use 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. Water-based lubes (such as Astroglide) are recommended. Vaseline, water, spit, 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 risks. Water, spit, and oils tend to be absorbed quickly by the body, meaning you'll get dry fast, which also increases your risks. 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 STIs!
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 blowjobs and handjobs), you should get tested regularly for HIV and other STIs, like syphilis, gonorrhea, herpes, HPV, Hep A, Hep B, Hep C, and Chlamydia. Some people get tested every few months, while others feel they only need to 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 like syphilis! Remember, you can still get and spread other STIs, and that getting them could really hurt your immune system. Let your doctor know if you have other STIs so they can help keep you healthy.
- Talk to your doctor about any weird discharges you find coming from your genitals or ass.
surgery & me:
Info for Trans Women who’ve had genital surgeries

Many trans women love the genitals they were born with and don’t feel the 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 sexual reassignment surgery (SRS), vaginoplasty, or orchidectomy (removing the testicles). If you are or are sleeping with one of these women, this section is for you!

WHAT CAN I DO? WHAT CAN’T I DO?

Orchidectomy – An orchi removes the testicles, 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 HIV and STI transmission! 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, try using non-microwavable saran wrap!

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 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.
- Trans women’s vaginas are less stretchy and more delicate than cis women’s and trans men’s vaginas, 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 2 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! Follow your surgeon’s guidelines for dilation schedule. Some trans women stop dilating after a few years – but beware, this can lead to permanent vaginal shrinking, which is usually irreversible!
- 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 (Human Papillomavirus) 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.
- Talk to your doctor about any weird discharges you find coming from your genitals or ass.
+inject me:
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. They can also be part of our lives if we use drugs such as crystal meth or heroin. And sometimes they can be part of our lives if we decide to have silicone injections to change our bodies. Here are some things to keep in mind:

- Always use a new, clean needle every time you inject something! You can get free needles from needle exchanges like The Works (Toronto), Oasis (Ottawa), or CACTUS (Montreal).
- Hormones are usually injected with a different gauge (size) of needle than drugs! Hormones are usually injected with muscular gauge needles, so make sure to have some on hand!
- Try not to share needles or use needles more than once.
- Don’t just throw needles out! If you don’t have a hazardous waste bin nearby, put them in a plastic water bottle and take them to a needle exchange later. Many community centres, such as The 519 Church Street Community Centre, have hazardous waste bins in their bathrooms, too!
- Make sure to keep your injection sites clean by swabbing them with alcohol before injecting and using band-aids after.
pay me:
Additional Safety Tips and Tricks for Trans Sex Workers

Sex work can be a great, fun way to support yourself and pay for hormones and surgeries. For some of us, we do sex work just to make money, while for others it can also be a self-esteem boost, validating our identities and bodies as desirable. If you choose to do sex work, there are some ways to make it safer for yourself and your clients! Here are a few:

- 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, including The 519 Church Street Community Centre.
- Get money first, get down second! No pay, no play. Make sure that your clients pay you upfront.
- Check out the Bad Date Book and Bad Date lists from your local sex worker’s rights organization, like Maggie’s (Toronto), POWER (Ottawa), or Stella (Montreal). These contain information on bad clients who have hurt, robbed, or killed other sex workers.
- If you are robbed, attacked, raped, or not paid, consider reporting it to your local sex worker’s rights organization, or to the police.
- 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 them do the same for you.
- Avoid wearing necklaces or scarves! These can be used to choke you if the date goes bad.
- 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, in case the date goes bad. If you can’t find a friend to do this, pretend to call a friend when the client arrives and tell this “friend” the client’s name and what they look like, and that you’ll call again after the client leaves. 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.
- 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 in your lips will increase your risk of getting HIV, and other STIs.
- Don’t carry valuables or too many pieces of identification, if you can. Sometimes a bad client will rob you and you might be left with no ID! Having your health card on you can be good, though, in case something happens and you need to go to the hospital.
- Never believe the client! Always be aware that they might be lying to you.
- Be clear and firm about your prices and your limits! If you prefer to use condoms for blowjobs, 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!
- Dates with more than one client 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 or, if you’re in Toronto, call Special Victims Section (which will never charge you for reporting abusive clients) at 416-456-7259.
+break it down:
Sexually Transmitted Infections

Getting an STI isn’t the end of the world. But, left untreated, it can seriously 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. Much of this information is based on the information given in PRIMED: The Back Pocket Guide for Transmen & The Men Who Dig Them. Thanks, guys!

**HIV (Human Immunodeficiency Virus)**
HIV can lead to AIDS. Not all people with HIV have or will have AIDS but all people with AIDS have HIV.

**How you get it:**
+ Unprotected anal or vaginal/frontal sex.
+ Any blood-to-blood contact or blood-to-tissue contact.
+ It can be passed from parent to child during birth, but this is preventable.

**How they treat it:**
+ Talk to your doctor.
+ There is no cure for HIV, however it is not a death sentence and can be treated with medications to keep you healthy.

**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.
+ Contact with a syphilis sore.
+ It can be passed from parent to child during birth.

**What it can feel like:**
+ Many people do not have symptoms.
+ Some people get a painless open sore on their body (genitals, anus, or mouth being the most common places)
+ Some people experience hairloss, rashes (especially on the hands and feet), fever, swollen glands, and muscle and joint pain.

**How they treat it:**
+ Talk to your doctor.
+ Syphilis is usually fully curable with antibiotics or creams and gels if caught early.

**How to reduce your chance of getting and giving it:**
+ Use condoms for anal, oral and vaginal/frontal sex with cocks and strapless and strap-ons.
+ Use gloves for handjobs.
+ Use dental dams for oral sex with vag or frontal parts.
+ Use a condom for oral, vaginal/frontal, or anal sex.
+ It can be passed from parent to child during birth.

**Genital Herpes**

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

**What it can feel like:**
+ Many people do not have symptoms, but if they do the symptoms will occur 1 week after transmission.
+ Itching or tingling in the genital area.
+ Tender of 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.

**Gonorrhoea**

**How you get it:**
+ Use a dental dam for oral sex with vagina or front hole.
+ Use gloves for handjobs.
+ Use a condom for 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 2-5 days after transmission.
+ Yellow or bloody discharge from penis, strapless, vagina, front hole, or anus.
+ 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.
+ Gonorrhoea is treatable with antibiotics.
+ Untreated, gonorrhoea can lead to pelvic inflammatory disease (PID).

**How to reduce your chance of getting and giving it:**
+ Use condoms for anal, oral, vaginal/frontal, or anal sex.
+ Warts from the hands can be transferred to the genitals.

**Chlamydia**

**How you get it:**
+ Use condoms for anal, oral, vaginal/frontal, or anal 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, symptom 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 (PID).

**How to reduce your chance of getting and giving it:**
+ Use condoms for anal, oral, vaginal/frontal, and anal sex.
+ Warts from the hands can be transferred to the genitals.

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

**How you get it:**
+ Skin-to-skin contact with the infected area.
+ Unprotected oral, anal, or vaginal/frontal sex.
+ It can be passed from parent to child during childbirth.

**What it can feel like:**
+ Many people do not have symptoms.
+ Single 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, HPV can lead to anal or cervical cancers. It is not currently known if post-op trans women are at risk for cervical cancer. Ask your doctor about getting a pap smear, if you are post-op.

**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 handjobs.
+ Warts from the hands can be transferred to the genitals.
If you need more information, referrals for sexual health clinics, condoms, or lubricants, contact The 519 Church Street Community Centre (Toronto)

www.the519.org