

Common Sexual Health Questions & Answers

A Guide for Youth and Families

Step Forward

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This guide will...

- Serve as a resource for youth and parents/ caregivers
- Suggest ideas for enhancing parent/ caregiver-youth communication about sexual health topics
- Help parents/ caregivers navigate difficult questions
- Provide answers to sexual health questions that are frequently asked by youth
- Offer clarification on complex topics
- Give insight into youth sexual health concerns and needs

What is Step Forward?

Step Forward by CODAC began as a program created in collaboration with the University of Arizona Southwest Institute for Research on Women and the Southern Arizona Aids Foundation, funded by a five year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA.) The program provided substance abuse treatment, comprehensive sexuality education, and free, confidential HIV testing along with risk reduction counseling to youth ages 12 – 17.

A key component of the Step Forward Grant is the comprehensive sexuality education curriculum called SIROW Health Education for Youth (SIROW-HEY.) SIROW- HEY provides factual information about sexual health topics including puberty, reproductive/sexual anatomy and physiology, sexually transmitted infections (STIs,) HIV/AIDS, safer sex protection, relationships, and communication skills. SIROW-HEY not only equips youth with the information they need to make healthy choices, but also focuses on skill development through interactive activities and exercises.

Although the grant funding has ended, the Step Forward division of CODAC Behavioral Health Services continues to provide counseling, comprehensive sexuality education, and wellness services to families, teens, and children, ages six and older.

What inspired this guide?

Adolescence is a time when youth become curious about, and may start to explore, their sexuality. Unfortunately, many youth lack access to accurate sexual health information. Through Step Forward, youth participants have the opportunity to get their questions answered by asking them anonymously. From a database of more than 300 questions, 35 of the most common were selected for this guide. These questions demonstrate youths' concerns regarding their sexual health, their desire for factual information, and their need for validation and reassurance.

Tips for Talking about Sex with Youth...For Parents/Caregivers

Be askable – Most of the time youth are looking for reassurance that what they're experiencing is normal. You can show your youth that you are approachable by listening and maintaining mutual respect.

Listen – Listen more than you speak and encourage two-way communication. This is the only way to ensure that you and your youth understand each other.

Maintain mutual respect – Make your boundaries and values clear but allow your youth to express theirs too. Accept that you and your youth may not have the same values, and let your youth know that's ok.

Use the media to spark conversations – Instead of turning off an inappropriate show, have a conversation with your youth about the show's messages. There are plenty of teachable moments in TV, movies, and the internet, and it's important to discuss both negative and positive media messages.

Don't put too much pressure on yourself – It's OK if you don't know all the answers! This is an opportunity for you to find the answer together. Refer to the *Resources* section for reliable sources of sexual health information.

Find out what's really being asked – Your youth may not have the vocabulary to express his/her ideas or questions. Ask clarifying questions like, "What have you heard about that?"

Ditch "the talk" – Sexual communication is a lifelong conversation!

Adapted from: Huberman & Alford (2005). *Are you an askable parent?* Advocates for Youth; Planned Parenthood (2012). *Talking to Kids about Sex and Sexuality*; and Planned Parenthood of New York City (2009). *Hey, what do I say? A parent to parent guide on how to talk to children about sexuality*.

- Since most schools don't offer comprehensive sex education, many youth rely on their peers or the internet for sexual health information.
- However, many youth would prefer to discuss their sexual health with a parent/caregiver.
- Youth say their parents/caregivers have the biggest influence on their decisions about sex.
- Youth who talk with their parents/caregivers about sex are more likely to delay sexual behaviors, use condoms, establish personal values, and make healthy choices.

What happens when your youth asks a question that you don't know how to answer? Here are some guidelines to help you through!

1. **Validate the question** – Good question! I'm glad you asked me about it...*or* That's interesting. I can see why you're wondering that...
2. **Make sure you understand the question** – If I understand, you want to know about...*is that right?* *or* Tell me more about what you're asking...
3. **Admit when you're uncomfortable or don't know an answer, and give yourself time if you aren't sure of the best way to approach the question** – I need to take some time to think that over so I respond to you in the best way I know how. I will get back to you... *Make sure to follow up!*
4. **Answer factually, clarifying slang before answering the question** – Q: What happens to balls during puberty? A: "Balls" is slang for testicles. A male's testicles grow during puberty. *If you don't know the answer, look it up together.*
5. **Find out what your "triggers" are and prepare for them** – If a topic triggers strong emotions for you (e.g., embarrassment, anger), defer to #1 and #3 or refer your youth to another trusted adult who may be more comfortable addressing the topic. *I'm glad you asked that but I may not be the best person to answer.*
6. **Avoid dismissing questions as "dumb/silly."** If your youth asked, it is probably because it's important to them – Refer to #1. Validate and answer the question, even if it seems silly.
7. **When asked personal questions, consider using a general answer** – Q: When did you have sex for the first time? A: Some people have sex for the first time when they're young and some wait until they're older. The important thing is to make your own choice to have sex only when you're ready. *To make it more personal you could add, I wasn't ready and I think I would have had a better experience if I waited or I felt ready and that made it a really special experience. Be truthful.*



Common Sexual Health Questions & Answers

When answering questions, the Step Forward health educators consistently emphasize the following messages:

- *There is a wide range of normal*
- *Everyone is different (and that's okay!)*
- *Consensual sex is the only sex a person should have*
- *Many values-based questions are matters of personal choice*
- *Having a positive self-esteem helps us make healthy choices*
- *Healthy communication can foster positive relationships*

Sexual/Reproductive Anatomy & Physiology

➤ *How do you get a yeast infection?*

A yeast infection is caused by an imbalance in the natural bacteria of the vagina. It is not considered a sexually transmitted infection. Changes in the acidity, or pH, of the vagina may allow naturally-occurring fungi to grow, leading to a yeast infection. This pH imbalance can be caused by overuse of antibiotics, wearing wet clothing such as swimsuits or workout clothes for long periods of time, douching, using feminine hygiene sprays or washes, scented tampons or pads, some spermicidal jellies or creams, and flavored lubricants. Uncontrolled diabetes and a weak immune system can cause yeast infections that keep coming back, even after treatment. Over-the-counter and prescription treatments are available in cream, suppository, and pill form. It is best to see a health care provider for diagnosis and treatment.

Sexual/Reproductive Anatomy & Physiology continued

➤ ***If someone doesn't bleed the first time they have sex does that mean it wasn't really their first time?***

No. A person does not always bleed the first time they have sex. Females are born with a hymen, or piece of skin/tissue near the opening of the vagina. Sometimes, this tissue will tear the first time a female has vaginal sex (penis-to-vagina) causing the bleeding that we commonly hear about. However, for many females, by the time they have vaginal sex the hymen has already worn away from other physical activities such as riding a bike, exercise, or even walking. Thus, the only way to know whether it is a person's first time having sex is by talking about it openly and honestly!

➤ ***What's a clitoris? Is it the same as the g-spot?***

The clitoris is a small round nub-like structure located at the top of a female's vulva and below the pubic bone. The clitoris is made of sensitive tissue that can produce pleasurable sensations when stimulated. Some researchers believe the g-spot is an extension of the clitoris, inside the body. Other researchers believe the g-spot is its own separate body part. These researchers say that the g-spot is located on the front wall of the vagina between the pubic bone and the cervix. This area is thought to be made of sensitive tissue that produces pleasurable sensations when stimulated.

➤ ***Is it normal for a woman to get her period irregularly?***

Many females experience irregular periods (menstruation). This is particularly common among young females and oftentimes stress, diet/nutrition, and level of physical activity may be some factors that affect the regularity of menstruation. Oftentimes, there is no specific or harmful reason why this happens. Some less common factors may be uterine fibroids, ovarian cysts, or another sexual/reproductive condition. The average time between two periods (menstrual cycle) is 23 to 32 days, and the average period lasts 3 to 10 days. If a female's period is absent for months at a time or lasts for more than a few weeks at a time, it may be a good idea to consult a health care provider. In some situations, a health care provider may prescribe hormonal contraceptives (birth control) to regulate menstruation. A female may also consider charting/tracking her menstrual cycle using a calendar or smart phone app.

Sexual/Reproductive Anatomy & Physiology continued

➤ *Is it normal to have a vaginal discharge on a daily basis?*

Yes, vaginal discharge on a daily basis is normal. Expelling discharge is the vagina's way of cleaning itself and staying healthy. However, everyone is different and it is important to get to know or recognize what normal vaginal discharge is like for one's own body. Sudden changes in the texture, consistency, volume, appearance, or smell of one's discharge may be a sign of infection or some other issue that may require a visit with a health care provider.



➤ *Why do girls have periods?*

Periods (menstruation) are a healthy, normal function of the female body. Each month, beginning at puberty, a nutrient-rich lining builds up along the walls of the uterus in preparation for a pregnancy. If no pregnancy occurs, the body signals the uterus to shed its lining and expel it from the body. This process may take 3 to

10 days on average. Females who are using certain types of hormonal contraception (e.g., birth control pills, the patch) may not have a period or may have a very light period, and this is because the contraception prevents the uterine lining from developing.

➤ *How long does it take for cum to die after ejaculation?*

Cum (semen) is a combination of sperm and seminal fluid produced in a male's body. If semen is ejaculated into another person's body, the sperm can live up to 7 days, but on average live 3 to 5 days. However, if ejaculated outside of a person's body the sperm does not live very long. It is believed that once the semen has dried on a surface, usually the sperm will no longer be alive.

Sexual/Reproductive Anatomy & Physiology

continued

➤ *Why do some guys have foreskin and some don't?*

All males are born with foreskin. The foreskin is a double-layered fold of skin that covers the head of the penis and protects the urinary opening when the penis is not erect. Male circumcision is a medical procedure in which the foreskin is surgically removed, usually at birth, resulting in a 'circumcised penis.' 'Uncircumcised' is the term used when the foreskin of the penis is still intact or not removed. It is the choice of the parent whether a male infant will be circumcised or uncircumcised. The decision to circumcise or not may be directed by cultural, religious, or health factors. Both practices are considered normal and currently about half of newborn males are circumcised and half remain uncircumcised.

➤ *Why do guys' balls drop?*

During puberty a male's penis and balls (testicles) grow. The scrotum, a thin external sac of skin that contains the testicles, grows so that the testicles inside hang lower. Nothing has truly dropped; the testicles and scrotum have simply grown larger. The testicles may also adjust to body temperature changes. The natural reaction of the testicles is to drop (move away from the body) or rise (move closer to the body) to maintain a consistent healthy temperature for sperm production.



➤ *If a boy is a hermaphrodite, does he have both male and female parts?*

Hermaphrodite (now referred to as Intersex) is when a person's reproductive or sexual anatomy doesn't fit the typical definitions of female or male. There are many variations, but generally a person who is Intersex has a combination of typically male and typically female internal and external anatomy. For example, a person appearing female on the outside may have a male testicle inside of the body. Intersex anatomy can show up at birth or sometimes it is unknown until puberty or adulthood, or ever (even to the individuals themselves). There are multiple variations in sex characteristics that do not allow an individual to be distinctly identified as physically male or female.

Sexual Behaviors & Choices

➤ *What is being abstinent?*

Being sexually abstinent does not have a single meaning. While sexual abstinence generally refers to refraining from or not having sex, what makes this concept complicated is that the meaning of 'sex' can be different for different people. For some people, being abstinent means avoiding sexual activity of any kind, including kissing, touching in a sexual way, or masturbation. For other people, being abstinent could mean not engaging in oral sex (mouth-to-penis/vagina/anus), vaginal sex (penis-to-vagina), or anal sex (penis-to-anus). These types of sexual abstinence are the only 100% effective way to prevent pregnancy and sexually transmitted infections (STIs). For other people, abstinence means not having vaginal sex, but



engaging in oral or anal sex. There is also the idea of postponement which is similar to abstinence but some people think of it as not having sex until a certain later time (e.g., until they're in love, until they're in college, until they're married). It is important for each individual to decide what abstinence means to them and to communicate that to their intimate partner(s).

➤ *Is swallowing cum or pre-cum bad?*

Whether or not a behavior is 'bad' depends on a person's values, attitudes, and beliefs. Swallowing male or female cum (semen or vaginal fluids) or pre-cum (pre-ejaculate) is a personal choice that requires consent from each partner. Partners can have a conversation about whether or not they feel comfortable with this behavior. If a sexually transmitted infection (STI) is present, swallowing or exposure to semen/vaginal fluids in the mouth could put a person at risk of contracting the STI because infection is carried in semen and vaginal fluids. Some strategies for preventing the transmission of STIs during oral sex include using a male condom for oral sex (mouth-to-penis), and a dental dam or plastic wrap for oral sex (mouth-to-vagina/anus). The only way to know if a person has an STI is to get tested. See the Resources section for STI testing locations.

Sexual Behaviors & Choices continued

➤ *Is it bad to cum inside a person's anus?*

Whether or not a behavior is 'bad' depends on a person's values, attitudes, and beliefs. The decision to cum (ejaculate) inside the anus is a matter of personal choice and requires consent from each partner. Anal sex (penis-to-anus) is considered a high-risk sexual behavior because of the possibility of tearing inside the rectum; the walls of the rectum are thin and absorbent, and unlike the vagina and the mouth, the rectum does not self-lubricate. Ejaculating inside a person's anus cannot cause pregnancy because the rectum is not connected to the reproductive system. However, if sexually transmitted infections (STIs) are present, ejaculating inside the anus may result in infection. Using a condom and a water-based lubricant can significantly decrease a person's risk of infection.



Safer Sex Protection

➤ *Is wearing double condoms better than one?*

No, wearing double condoms is NOT better than wearing one condom. If two condoms are used during vaginal sex (penis-to-vagina) or anal sex (penis-to-anus), an excessive amount of friction or rubbing may occur between the two condoms and increase the likelihood of either, or both, condoms tearing. When used correctly (e.g., package not exposed to extreme temperatures, condom worn on penis without air bubbles, etc.), one condom can be effective (88-98%) for protection against pregnancy and some sexually transmitted infections (STIs). For further protection against pregnancy, condoms can be used in combination with other contraceptive methods (e.g., birth control pills, spermicides, sponge).



➤ *Can a person be allergic to condoms?*

A person can be allergic to latex condoms, however there are alternative condom choices available. For example, people can use synthetic condoms made of polyurethane. Polyurethane condoms are available as male (external) condoms and female (internal) condoms. Natural materials such as lambskin condoms exist as well but do not provide good protection. Lambskin condoms do protect against pregnancy but DO NOT protect against sexually transmitted infections (STIs).

➤ *Which form of birth control is more effective?*

Sexual abstinence is the only contraceptive method (birth control) that is 100% effective against pregnancy. There are many contraceptive options available, ranging in effectiveness from 71% to 99%. However, the effectiveness of each contraceptive method depends on consistent and correct usage as directed by a health care provider or over-the-counter packaging. Some things an individual may consider when choosing a contraceptive method include where to get it, the cost, what it protects against, the side effects, whether or not it requires a prescription, and if it suits the individual's lifestyle.

Safer Sex Protection continued

➤ *What happens if you have protected sex but the condom breaks?*

Condoms are made of a very strong material, but if a condom is put on incorrectly or used past its expiration date, it can tear or slip off, putting a person at risk for sexually transmitted infections (STIs) during vaginal sex (penis-to-vagina), anal sex (penis-to-anus), or oral sex (mouth-to-penis/vagina/anus). If STIs are a concern, the individual or couple may follow up with an STI test. See the *Resources* section for STI testing locations. If pregnancy is a concern, the individual or couple has the option of using Emergency Contraception (sometimes referred to as “the morning-after pill”). Emergency Contraception is available over-the-counter and may prevent pregnancy if taken within 72 hours. The sooner Emergency Contraception is taken the more effective it will be.



Pregnancy

➤ *Does the morning-after pill kill the baby?*

The “morning-after pill” (Emergency Contraception) does not kill the baby. It primarily works by stopping the release of an egg from the ovary (ovulation) or preventing attachment of a fertilized egg to the uterus (implantation). It is possible that it may also work by preventing sperm from uniting with the egg (fertilization). Pregnancy occurs when a sperm fertilizes an egg, and the fertilized egg attaches to the wall of the uterus. If a female is already pregnant when Emergency Contraception is taken, the pill will not interfere with the pregnancy. Consult your local pharmacy for available Emergency Contraception brands.



➤ *Can girls get pregnant while on their period?*

Females can get pregnant during their period (menstruation) if they have unprotected vaginal sex (penis-to-vagina). Sperm usually survive 3 to 5 days, but can live up to 7 days in another person's body after ejaculation. If a female releases an egg from the ovary (ovulates) within 7 days of having sex, it may result in a pregnancy. The risk of pregnancy increases if the sex is unprotected (without a condom and/or other protection method). So if a female has sex within a week prior to ovulation, then it's possible she can get pregnant.

➤ *Could pre-cum make a girl pregnant?*

Yes, pre-cum (pre-ejaculate) can result in pregnancy. Pre-ejaculate is fluid that is released from the male's Cowper's Glands. The Cowper's Glands do not contain sperm but sperm can be present in the urethra from a previous ejaculation. Therefore pre-ejaculate may have sperm present which can cause pregnancy.

➤ *When a girl is pregnant, is it bad to have sex?*

Whether or not a behavior is 'bad' depends on a person's values, attitudes, and beliefs. Sex during pregnancy is safe for most females with uncomplicated, low-risk pregnancies. Sex during pregnancy is a personal choice that requires the consent of both partners.

Pregnancy continued

➤ *Is it hard to get pregnant when you have irregular periods?*

There is not a simple yes or no answer to this question. Experiencing irregular periods (menstruation) could be due to various reasons. Some women have no problems becoming pregnant despite irregular periods. On the other hand, having irregular periods, no periods, or abnormal bleeding may indicate that a female is not ovulating or it could be due to other health concerns. If a female is not ovulating, it may be more challenging to become pregnant. A female would want to discuss her irregular periods with a health care provider to decide on proper treatment, if needed.



➤ *Does age have anything to do with getting pregnant?*

A female's ability to become pregnant begins at puberty when she starts releasing eggs (ovulating) and decreases with age. Young females have more eggs in their ovaries, and in addition a greater number of genetically normal eggs. Since a female is born with all the eggs that she will have in her lifetime, the older she gets the fewer eggs are left. Also, as a female ages her number of genetically normal eggs decreases. This is why females have a decreasing fertility rate, increased miscarriage rate, and increased chance of birth defects like Down syndrome as they age. Males are capable of impregnating a female starting at puberty when sperm production begins. A male's reproductive capabilities change gradually with age but are not as significantly impacted as a woman's.

Sexually Transmitted Infections (STIs)

➤ *Who has more of a chance of getting an STI? Males or females?*

Sexually transmitted infections (STIs) do not discriminate. Both males and females are equally at risk of contracting an STI if they are engaging in sexual behaviors with someone who is already infected. A person's level of risk for infection depends on the sexual behaviors they engage in and if they choose to use a protection method, not their gender.

➤ *Can a person still pass herpes to someone if they're having sex when they don't have an outbreak?*

Yes, a person can pass herpes to another person even when they don't have an outbreak (sores). However, the risk of transmitting herpes when no sores are present is much lower than when sores are present. Herpes can be passed through oral sex (mouth-to-penis/vagina/anus), vaginal sex (penis-to-vagina), or anal sex (penis-to-anus), as well as kissing. These factors make herpes a more challenging sexually transmitted infection to protect against. The individual who is infected with herpes can reduce the frequency of outbreaks and their risk of passing herpes to others by taking medication. Some other prevention strategies include using a male condom or dental dam for oral sex, and male or female condoms for anal or vaginal sex. Also, since risk of transmission is greater when sores are present, partners may choose to abstain from sexual activity during an outbreak.



➤ *Can sperm carry any kind of diseases?*

No, sperm do not carry or transmit sexually transmitted infections (STIs) or diseases, but semen does. Semen is made up of seminal fluids that come from the seminal vesicles and prostate gland that then mix with sperm. The seminal fluids carry STIs, not sperm. To protect against STIs carried in seminal fluids, partners may use male (external) or female (internal) condoms.

Sexually Transmitted Infections (STIs) continued

- ***If you have an STI that's not treated, can it become permanent and not be curable anymore?***

Sexually transmitted infections (STIs), if left untreated, may have serious effects. STIs pose serious health risks, and those risks increase when the infections go untreated. STIs that are left untreated can cause damage to a female's and male's reproductive and other organs. STIs can still be treated even after prolonged infection, however the damage that was already caused would be permanent. If an individual feels they have been exposed to an STI, the person should consult a health care provider and get tested. See the *At-A-Glance* section for more information on STIs and the *Resources* section for STI testing locations.

- ***What are ways of getting STIs?***

A sexually transmitted infection (STI) must be present to be transmitted. STIs are primarily transmitted through skin-to-skin contact or transfer of bodily fluids (vaginal fluids, semen, and blood). If a person is engaging in risky sexual behaviors (e.g., unprotected vaginal, anal, or oral sex, multiple sexual partners, etc.) and other risk behaviors (e.g., injection drug use, tattooing, piercing, etc.) their chances of contracting an STI may increase. If a person believes they have contracted an STI, it is important to abstain from sexual behaviors until they have been tested and received the results of the test. Using male condoms, female condoms, and dental dams can reduce a person's risk of sexually contracting or transmitting an STI.



HIV/AIDS

➤ *What are symptoms of HIV?*

HIV (Human Immunodeficiency Virus) affects each individual who contracts the virus differently. Some people may have flu-like symptoms the first few weeks after they become infected, and others may have no symptoms. Either way, a person may not know they are infected. The only way to know if a person is infected is to get tested. People can often go 12 to 15 years before their immune system is weakened to the point that they have any symptoms (e.g., unexplained weight loss or tiredness, white spots in the mouth, reoccurring yeast infections in women). Usually at that point, they have been diagnosed with AIDS (Acquired Immune Deficiency Syndrome) and are dealing with opportunistic infections. Opportunistic infections are any infections – bacterial, cancerous, viral, etc. – that take advantage of the body's lack of immunity and can cause death in those whose immune system is weakened.



➤ *Can HIV be transmitted through semen on your hand from a blow job?*

If a person is engaging in a blow job (mouth-to-penis oral sex) with someone who has HIV, it is possible for HIV to be transmitted. However, the risk of transmitting HIV through semen on the person's hand is very low. There are two ways transmission could happen: (1) if the person has a cut, sore, or other break in their skin to allow the virus to enter their body; or (2) if the person engages in self-masturbation while the fluid is still on their hand. A greater likelihood of HIV transmission during mouth-to-penis oral sex would be through exposure to semen in the mouth or throat. A male condom can protect against transmission of HIV and some other sexually transmitted infections (STIs) during mouth-to-penis oral sex.

➤ *Can having an STI lead to HIV?*

Having a sexually transmitted infection (STI) cannot cause HIV or “transform” into HIV, but it can put someone at greater risk of contracting HIV. One reason is because a person's immune system may be busy trying to fight off the STI, which would make them more likely to contract other infections. Also, depending on the type of STI the person has, there may be open sores or lesions on the body (e.g., herpes sores) which would create a route of entry for the virus. It's important to get tested and treated if a person has an STI. See the Resources section for STI testing and treatment locations.

Communication & Relationships

➤ *How do you tell your partner that you don't want to have sex with them?*

Everyone has the right to make decisions about their own body at any time and with anyone, even if it's someone with whom they have previously engaged in sexual behaviors. If a person knows that they don't want to have sex when the relationship begins, they can communicate that to their partner from the start. Telling a partner can be challenging and different depending on the relationship, an individual's self-esteem, and the communication skills used during the conversation. A person should be honest about their personal feelings. Using "I" statements can be effective - *"I feel pressured when you want to have sex. I would feel better if we could agree on when it's best for both of us."* A person can also practice or role play the conversation with a friend or someone trustworthy. If the person's partner truly cares, the partner will respect their decision. If partners have previously engaged in sex and one partner decides to abstain or is simply not in the mood to have sex for any reason, the other partner should respect their decision. Any sexual activity has to be consensual by each partner at all times. However, if a partner doesn't respect a person's wishes, it might be a good idea to re-evaluate the relationship.



Communication & Relationships continued

- *My boyfriend and I have a wonderful relationship and we've been together for a while but is a lot of arguing normal?*

The question if a lot of arguing is normal is a difficult one to answer, sometimes even for the two people in the relationship. People in relationships do not always agree and arguing can be a normal part of a healthy relationship. Let's think about arguing in terms of health. Healthy arguments may involve partners sharing their feelings and opinions respectfully and listening to one another. The partners might communicate openly about problems and work together at solving them. And despite arguing, the relationship continues to be enjoyable, exciting, and passionate. Unhealthy arguments may involve partners putting each other down, name-calling, and one person insisting on always being right. These arguments might escalate to physical violence, and they could start affecting other parts of life. And because of arguing, the relationship is no longer enjoyable or rewarding. Knowing the characteristics of healthy and unhealthy communication can help a person decide if the arguing in his/her relationship is normal and healthy for him/her.



Abuse & Violence

➤ *How do you tell someone that your boyfriend or girlfriend is abusive?*

Letting others know that a partner is abusive can be very difficult and takes a lot of courage. Figuring out a safe way to tell someone and get help is important because no one deserves to get hurt.

Here are some suggestions for making this conversation easier: first, talk to a trustworthy person, preferably an adult who you know will listen and won't judge; next, find a good time and location to talk to the person to avoid interruptions, distractions, or eavesdroppers. Consider approaching the person beforehand, let them know the conversation will be about something private, and ask when they are available. To help ease nerves, try practicing what to say. Consider asking the person to listen to the whole story before responding. Finally, don't be afraid to express true feelings and needs. If the person doesn't respond as expected, try not to be discouraged. Find another trustworthy person and try again. There is always someone who can help. There are 24-hour Crisis Hotlines with individuals who are trained to handle situations like abuse in relationships.



24-Hour Crisis Hotlines:

- Southern Arizona Center Against Sexual Assault (SACASA): (800) 400-1001 (Tucson)
- Emerge! Center Against Domestic Abuse: 888-428-0101 (Tucson)
- National Domestic Violence Hotline: 800-787-3224
- Loveisrespect.org hotline for youth: 1-866-331-9474

A person can also visit SACASA and Emerge! in person. See the *Resources* section for more information.

Abuse & Violence continued

➤ ***What do you do when someone you care about doesn't want to get out of an abusive relationship?***

When someone you care about doesn't want to leave an abusive relationship, you may feel pretty helpless. Believe it or not though, there are several things you can do to help the person you care about. A starting point may be to talk with the person; express that you care about them and you're concerned for their well-being - *"I really care about you, I'm your friend, and I want to make sure you're OK. I'm here for you."* By reaching out, you can show them that you care. However, be aware that the person may react negatively. Oftentimes, people who are involved in abusive relationships feel defensive, embarrassed or ashamed. You are not at fault for being concerned. Your friend just may not be ready to recognize or accept their situation.

Being supportive doesn't mean telling your friend over and over that they should leave. Instead, listening can be a very powerful tool. Has the person explained to you why they don't want to leave the relationship? It's important to understand their perspective and realize that they will only leave the relationship when they are ready to leave. In the meantime, try your best to be supportive; check in with them, invite them to do fun things together, and offer resources. If they feel supported it may help them grow stronger and more confident which could lead to change. Remind the person that help is available if and when they are ready to leave the relationship. Avoid blaming them or insulting their partner.

Seeing someone you care about go through something like this can be very difficult so it's important to take care of yourself and your own needs as well. Abusive relationships are hard situations at any age. You should not have to handle your friend's situation alone. Seek out a trusted adult or contact one of the 24-hour Crisis Hotlines for your own support and help. See the *Resources* section for more information.

Abuse & Violence continued

➤ *What are reasons why someone can be abusive?*

Abuse is a learned behavior. People may learn this behavior from their environment growing up, from other people in their lives, or from popular culture and media (e.g., video games, movies, music). One factor that is common among all people who abuse is a need to exert power and control over another person. While there are many reasons why a person feels the need to control another person, some common reasons are: low self-esteem, feeling threatened, and feeling entitled to control someone else. Because abusive behavior is learned, it can also be unlearned, but only if the abuser is dedicated to changing and has the proper support and resources to do so. Even then, abusive behavior can be extremely difficult to change.

➤ *Does self-harming mean using drugs?*

Self-harm is defined as intentional direct injuring of body tissue most often done without suicidal intentions. Cutting, scratching, or burning oneself, hair-pulling, ingesting toxic substances, or banging or hitting body parts are examples of self-harm. Drug use is not typically considered self-harm because the harmful effects that may result are usually not intentional. However, people who harm themselves often do so while under the influence of alcohol or drugs.



At-A-Glance

Sexually Transmitted Infections (STIs)

Types of sexually transmitted infections (STIs)	How's it transmitted?	Can it be treated?	Can it be cured?
Bacterial			
Chlamydia	➤ Exchange of vaginal fluids and/or semen during vaginal, anal, or oral sex with someone who has chlamydia	YES	YES
Gonorrhea	➤ Exchange of vaginal fluids and/or semen during vaginal, anal, or oral sex with someone who has gonorrhea	YES	YES
Syphilis	➤ Exchange of vaginal fluids and/or semen during vaginal, anal, or oral sex with someone who has syphilis ➤ Skin-to-skin contact with a chancre (syphilis sore) or rash	YES	YES
Nongonococcal Urethritis (NGU)	➤ Exchange of vaginal fluids and/or semen during vaginal, anal, or oral sex with someone who has NGU	YES	YES
Viral			
Human Immunodeficiency Virus (HIV)	➤ Exchange of vaginal fluids, semen, and/or blood during vaginal, anal, or oral sex with someone who has HIV ➤ Sharing needles or other equipment used to inject drugs, steroids, or vitamins ➤ Contact with infected blood ➤ Mother-to-child during pregnancy, birth, and/or breastfeeding if the mother has HIV	YES	NO
Human Papillomavirus (HPV)	➤ Spread during vaginal, anal, or oral sex with someone who has HPV ➤ Genital-to-genital touching with someone who has HPV	YES	NO
Herpes	➤ Spread during vaginal, anal, oral sex or kissing someone who has herpes ➤ Genital-to-genital touching with someone who has herpes	YES	NO
Hepatitis	➤ Exchange of vaginal fluids, semen, and/or blood during vaginal, anal, or oral sex with someone who has hepatitis ➤ Sharing needles or other equipment used to inject drugs, steroids, or vitamins, body piercings or tattoos.	YES	NO
Parasitic			
Pubic Lice ("crabs")	➤ Skin-to-skin contact with someone who has pubic lice, often through sexual activity ➤ Sharing clothing, towels, or bedding used by an infected person	YES	YES
Scabies	➤ Skin-to-skin contact with someone who has scabies, often through sexual activity ➤ Sharing clothing, towels, or bedding used by an infected person	YES	YES
Trichomoniasis	➤ Spread during vaginal sex with someone who has trichomoniasis	YES	YES

Sexually Transmitted Infections (STIs) continued

*Remember, the only way to know if a person has a sexually transmitted infection is to **GET TESTED!***

STIs are NOT transmitted by:

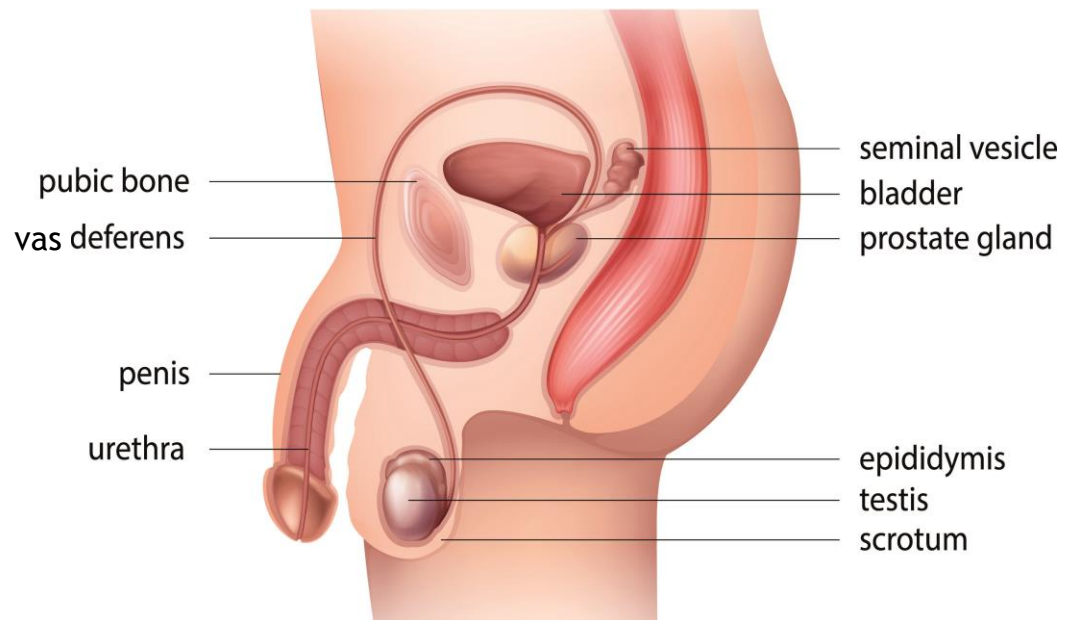
- ❌ Donating blood
- ❌ Hugging
- ❌ Tears
- ❌ Saliva
- ❌ Sweat
- ❌ Urine
- ❌ Mosquitoes or insects
- ❌ Sharing food, telephones, toilet seat, cups, or utensils



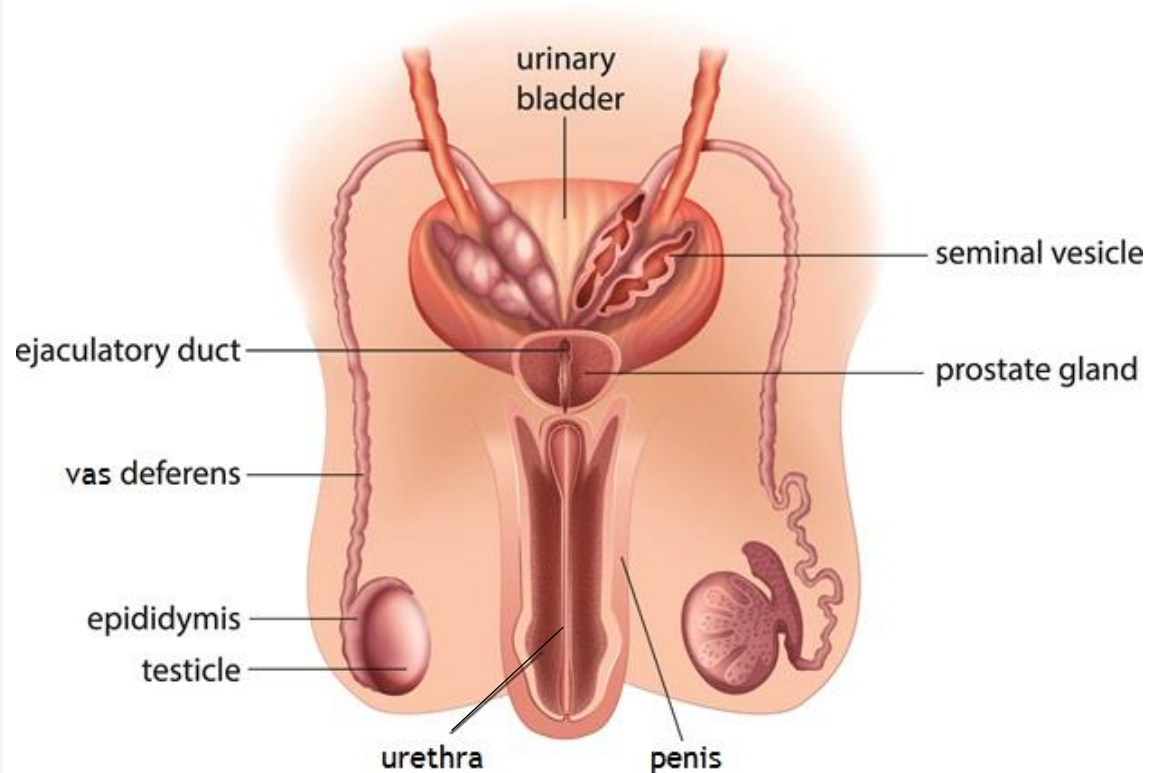
Other STI Facts

- Many STIs have NO symptoms.
- If symptoms do appear, some develop right away, some weeks or even months after exposure.
- Symptoms may come and go on their own. This does not mean that a person no longer has the STI. A person can transmit the infection to someone else when they have no symptoms.
- **The only way to know if a person has an STI is to get tested.** See the Resources section for STI testing and treatment locations.

Male Sexual/Reproductive Anatomy

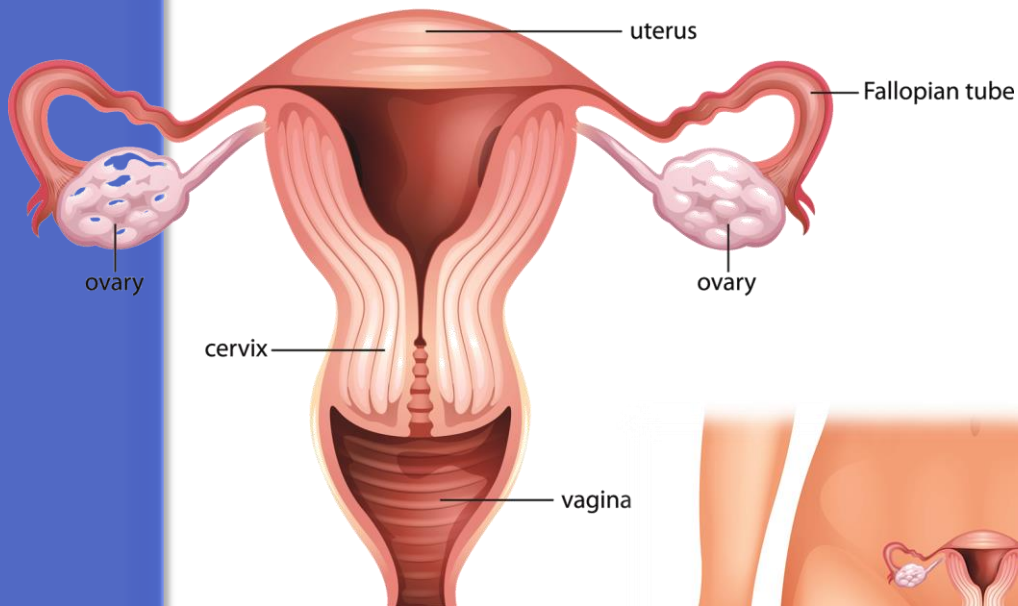


See *Glossary* for definitions of terms

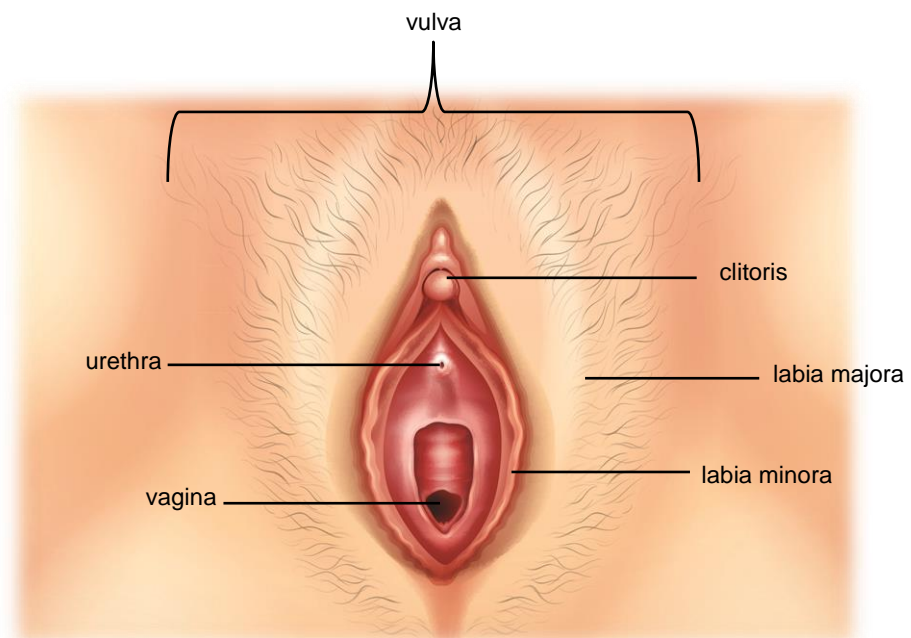
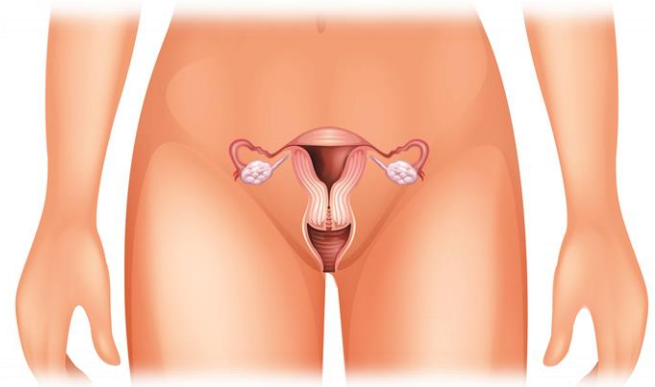


See *Glossary* for definitions of terms

Female Sexual/Reproductive Anatomy



See *Glossary* for definitions of terms



See *Glossary* for definitions of terms

Safer Sex Protection Methods

Type of Method	Description of Method	Effective against Pregnancy?	Effective against Sexually Transmitted Infections (STIs)?	Cost (Without insurance)*	Where can you get the method?	Side Effects (Not all possible side effects listed)
Abstinence/ Postponement	To not have sex/ postpone having sex until a later time	YES- only method that is 100% effective	YES- only method that is 100% effective	FREE!	You don't have to go anywhere	NONE!
Male Condom (External)	Covers the penis with a thin layer of latex or polyurethane (plastic) that will act as a barrier between partners	Perfect Use: 98% effective Typical Use: 82% effective	YES but not 100%. Male and female condoms are the only methods that protect against some STIs	\$1.88 (3 count) – \$27.99 (36 count) Free at some schools and clinics (Cannot be reused)	Drugstores, doctor's office, health clinics, supermarkets, sometimes school nurses	Some people are allergic to latex or the spermicides on the condom
Female Condom (Internal)	Inserted into the vagina for vaginal sex or put on the penis for anal sex, it acts as a barrier between partners. It is made out of a thin layer of polyurethane	Perfect Use: 95% effective Typical Use: 79% effective	YES but not 100%. Male and female condoms are the only methods that protect against some STIs	\$3.00 per condom (Cannot be reused)	Doctor's office, health clinic, community organizations, and online	Outer ring of the condom may slip into the vagina during intercourse. Difficulty inserting the condom
Dental Dam	Thin layer of latex or plastic that is placed over the vulva (outside of vagina) or the anus during oral sex, and acts as a barrier between partners	N/A This device is used for oral sex only	YES but not 100%. Using a barrier method during oral sex is effective against STIs	\$2.50 each (Cannot be reused). Can use plastic wrap or male condom (cut off tip, cut along the side, unroll)	Doctor's office, health clinic, and online. Plastic wrap may be purchased at supermarkets	May irritate the vagina if allergic to latex. Dental Dam may slip out of place during oral sex
Spermicide -Foam -Suppository -VCF "Film" -Jelly (used with diaphragm)	Inserted into the vagina 15 minutes before vaginal sex. Most spermicides kill sperm. Spermicides are most effective if used in combination with another method of safer sex protection	Perfect Use: 85% effective Typical Use: 71% effective	NO, in fact spermicides can irritate the vagina or penis, causing "micro" tears that could increase risk for some STIs	Foam - \$6.94 – \$16.99 (1 can) Suppository - \$6.98 – \$12.99 (1 box of 12) Film - \$9.96 – \$14.99 (1 box of 6-10 films) (Cannot be reused)	Drugstores, doctor's office, health clinics, supermarkets	May irritate the vagina or penis. Only effective for 1 hour after insertion
Birth Control Pills "The Pill"	Contain female hormones that prevent the release of an egg, thicken cervical mucus to keep sperm from entering the uterus, and may prevent a fertilized egg from implanting in uterus. One pill daily	Perfect Use: 99% effective Typical Use: 91% effective	NO	\$9-\$70 per monthly pill pack \$35-\$125 for initial medical exam	Birth Control Pills are a prescription medication. A clinician must see the client	May cause irregular bleeding, headaches, nausea, depression, dizziness, weight gain/loss, breast tenderness

*All costs are approximate and can vary from location to location.

Safer Sex Protection Methods continued

Type of Method	Description of Method	Effective against Pregnancy?	Effective against Sexually Transmitted Infections (STIs)?	Cost (Without insurance)*	Where can you get the method?	Side Effects (Not all possible side effects listed)
Depo-Provera "The Shot"	Injected every 3 months. Contains the synthetic hormone progestin, which prevents the release of an egg, thickens cervical mucus to keep sperm from entering the uterus, and may prevent a fertilized egg from implanting in uterus	Perfect Use: 99% effective Typical Use: 94% effective	NO	\$60-\$79 per injection (3-month supply). \$35-\$125 for exam. Some clinics charge less according to income	Depo-Provera is a prescription medication that must be injected by a clinician	May cause loss of monthly period, irregular bleeding, increased appetite, headaches, depression, skin and hair changes
Ortho Evra "The Patch"	A thin patch that sticks to the skin for 1 week. Contains hormones, which are absorbed through the skin and into the bloodstream. Hormones prevent the release of an egg, thicken cervical mucus to keep sperm from entering the uterus, and may prevent a fertilized egg from implanting in uterus	Perfect Use: 99% effective Typical use: 91% effective	NO	\$70-\$150 per month. \$35-\$125 for exam Some clinics charge less according to income	A clinician must prescribe Ortho-Evra	May cause breast discomfort, headache, skin irritation at the patch site, nausea, abdominal pain, menstrual cramps
NuvaRing "The Ring"	A vinyl-acetate ring that is inserted into the vagina for 3 weeks. The ring contains hormones, which flow slowly from the ring into the bloodstream. The hormones prevent the release of an egg, thicken cervical mucus to keep sperm from entering the uterus, and may prevent a fertilized egg from implanting in the uterus	Perfect Use: 99% effective Typical use: 91% effective	NO	\$70-\$105 per month	A clinician must prescribe NuvaRing	May cause headache, increased vaginal discharge, vaginal irritation or infection, and nausea
Implants	A matchstick-sized rod that is inserted in the arm to prevent pregnancy. Slowly releases hormones over time. The hormones prevent the release of an egg, thicken cervical mucus to keep sperm from entering the uterus, and may prevent a fertilized egg from implanting in uterus	Perfect Use: 99% effective Typical Use: 99% effective	NO	Costs between \$400 and \$800 up front, but lasts up to three years	Must be inserted and removed by a clinician	May cause irregular bleeding, headache, change in sex drive, pain at site of insertion

*All costs are approximate and can vary from location to location.

Safer Sex Protection Methods continued

Type of Method	Description of Method	Effective against Pregnancy?	Effective against Sexually Transmitted Infections (STIs)?	Cost (Without insurance)*	Where can you get the method?	Side Effects (Not all possible side effects listed)
Diaphragm/ Cervical Cap	Barrier methods that cover the cervix. Block the pathway of sperm and must be used with a spermicide, which kills sperm. A doctor or clinician must fit both methods	Perfect Use: 94% effective (diaphragm); 86% (cap) Typical Use: 88% effective (diaphragm); 71% (cap)	NO	\$50-\$66 for diaphragm or cap (reusable). \$50-\$125 for exam. \$4-8 for spermicides	A clinician must fit both diaphragms and cervical caps	Can be difficult to use, allergies to latex or spermicide, cannot be used during vaginal bleeding or infection
Sponge	A foam sponge that contains spermicide and is inserted into the vagina. Blocks the pathway of sperm and kills and/or immobilizes the sperm	Perfect Use: 91% effective Typical Use: 88% effective	NO	\$9-\$15 for a package of three (not reusable)	Drugstores, doctor's office, clinics, supermarkets	May be difficult to insert or remove. May cause vaginal irritation. May have allergies to spermicide
IUD- Intrauterine Device	A small plastic device that is inserted into a woman's uterus and may be left in place for 3-10 years depending on the type (copper or hormonal)	Perfect Use: 99.9% effective Typical Use: 99.9% effective	NO	\$150-\$300 for exam, insertion, and follow-up visit. Some clinics charge less according to income	IUD insertion and removal is a medical procedure. A clinician must see the client	May increase cramps, spotting between periods, may cause heavier and longer periods
Sterilization -Tubal ligation (female) -Vasectomy (male)	An operation that is intended to prevent the sperm from joining the egg by blocking either the woman's fallopian tubes (tubes that carry an egg) or a man's vas deferens (tubes that carry sperm)	Perfect Use: 99.5% effective (tubal ligation); 99.9% (vasectomy) Typical Use: 94-97% effective (tubal ligation); 99.9% (vasectomy)	NO	\$1,000-\$2,500 for tubal ligation. \$240-520 for vasectomy	Tubal ligation and vasectomy are medical procedures. A clinician must see the client	Mild bleeding or infection right after operation, reaction to anesthetic, reversibility cannot be guaranteed
Emergency Contraception "Morning-after pill" or "EC"	May prevent pregnancy <i>after</i> unprotected vaginal intercourse. Can prevent release of an egg and may also prevent a fertilized egg from implanting in the uterus	89% effective if taken within 72 hours after unprotected vaginal intercourse	NO	\$30-\$60 Some clinics charge less according to income	Drugstores, doctor's office, clinics, supermarkets. Prescription needed if under age 14	May cause headache, nausea and spot bleeding

*All costs are approximate and can vary from location to location.

Resources

Hours and locations were current at the time of printing. Readers may want to call providers to confirm information.

Relationship Violence/Sexual Assault

➤ **Emerge! Center Against Domestic Abuse**

2545 E. Adams Street (Outreach Office)

(520)881-7201 (Outreach Office)

(888)428-0101 (24-hour crisis line)

www.emergecenter.org

24-hour crisis line for victims/survivors of domestic abuse. Crisis shelter and transitional housing services. Outreach and Advocacy Program offers one-on-one support/education and support groups. Provides lay-legal advocacy including court accompaniment for victims.

➤ **Las Familias**

3618 East Pima Street

(520)327-7122 ext. 221

www.lasfamilias.org

Therapy and support services for survivors of childhood sexual abuse and domestic violence, ages 12 years and under. (Part of Arizona's Children Association).

➤ **Southern Arizona Center Against Sexual Assault (SACASA)**

Central: 1600 N. Country Club

(520)327-7273 (24-hour crisis line)

(800)400-1001 (24-hour crisis line)

www.sacasa.org

Su Voz Vale: 101 W. Irvington, Office 4-A

(520)434-0195

24-hr crisis line for victims/survivors of sexual assault, molestation, incest, and rape. Walk-in visits for advocacy services 8am to 5pm. Services available in Spanish and English. Staff of trained nurses available to provide medical exams after a sexual assault. Counseling for youth ages 12 and up.

➤ **24-hour National Domestic Violence Hotline**

(800)799-SAFE (7233) - will translate into over 170 languages

<http://www.thehotline.org/>

Hotline provides lifesaving tools and immediate support to enable victims/survivors to find safety and live lives free of abuse.

Reproductive Health & Pregnancy Services

➤ **Pima County Health Department (PCHD) Family Planning**

North
3550 N. 1st Ave., Suite #300
(520)243-2880

Hours of Operation

Mon-Fri 8:00am – 6:00pm

www.pimahealth.org/family/index.html

South
175 W. Irvington
(520)294-2026

Hours of Operation

Mon-Fri 8:00am – 5:00pm

East
6920 East Broadway, Suite A
(520)751-9086

Hours of Operation

Mon-Fri 8:00am – 5:00pm

Birth control, emergency contraception, pregnancy testing, gynecological exams, STI testing & treatment. Fees charged on a sliding scale based on income. No parental permission required. All services are confidential.

➤ **Planned Parenthood**

Central
2255 N. Wyatt Dr.
(520)408-7526

Hours of Operation

Monday 8:30am – 5:00pm

Tuesday 9:00am – 5:00pm

Wednesday 9:00am – 6:00pm

Thursday 8:30am – 5:00pm

Friday 8:30am – 5:00pm

Saturday closed

Sunday closed

Sunday closed

www.plannedparenthood.org/ppaz

Services include abortion services (Central location only), abortion referral, birth control, HIV/STI testing, STI treatment and vaccines, men's health care, emergency contraception, pregnancy testing, counseling, and services, and women's health care (e.g., gynecological exams).

Northwest
529 W. Wetmore Rd
(520)408-7526

Hours of Operation

Monday closed

Tuesday 9:00am – 7:00pm

Wednesday 9:00am – 7:00pm

Thursday 9:00am – 5:00pm

Friday 9:00am – 5:00pm

Saturday 9:00am – 1:00pm



➤ **Project C.O.N.T.A.C.T**

3550 N. 1st Avenue
(520)751-9086

<http://webcms.pima.gov/cms/one.aspx?portalId=169&pageId=18139>

Reproductive health care for eligible youth at little or no-cost. Primarily serves youth who are homeless, at risk of being homeless, or are high risk for pregnancy and sexually transmitted infections (STIs). All services are confidential, non-judgmental, do not require parent permission, and are provided on a walk-in basis.

HIV/STI Testing Services

(See also Reproductive Health & Pregnancy Services)

➤ **Pima County Health Department – Teresa Lee STD/HIV Clinic**

332 S. Freeway
(520)791-7676

www.pimahealth.org/disease/tlee.html

Low-cost counseling and STI/HIV testing, treatment, and services. No one is turned away due to lack of payment. Testing services for chlamydia, gonorrhea, and syphilis. Conventional and rapid HIV blood testing, HIV counseling, and HIV/AIDS prevention/education. Does not provide birth control. Walk in only. Will see youth as young as 14 without parental consent.

➤ **Southern Arizona AIDS Foundation (SAAF)**

375 S. Euclid Ave.
(520)628-7223

Hours of Operation

Monday	8:30am – 1:00pm
Tuesday	1:00pm – 8:00pm
Wednesday	8:30am – 1:00pm
Thursday	1:00pm – 8:00pm
Friday	10:00am – 4:00pm
Sat/Sun	closed

www.saaaf.org

HIV testing, prevention programs and services for people living with or affected by HIV and AIDS. Case management, support groups, and testing available evenings and weekend by appointment.



LGBTQ Services

➤ **EON Youth Lounge @ SAAF**

375 S. Euclid Ave.

(520)628-7223

Drop-in center serving LGBTQ and Allied youth. A safe hangout space for youth ages 12 to 23. Includes homeless youth project, HIV testing, support groups, and fun activities.

➤ **Living Out Loud Health & Wellness Center**

3130 E. Broadway Blvd.

(520)327-4505

Wellness services, traditional behavioral health treatment as well as primary care for children and youth age six and older, adults, couples and families in the LGBTQ and Allied community.



Helpful Websites

- **Advocates for Youth**
www.advocatesforyouth.org and www.youthresource.com
- **Bedsider**
<http://bedsider.org/>
- **Centers for Disease Control and Prevention (CDC), STD Information**
www.cdc.gov/std
- **Columbia University's Go Ask Alice: Health Q&A**
www.goaskalice.com
- **Emergency Contraception website**
<http://ec.princeton.edu/>
- **Guttmacher Institute**
www.guttmacher.org
- **Kaiser Family Foundation**
www.kff.org
- **loveisrespect.org**
<http://www.loveisrespect.org/>
- **Planned Parenthood Federation of America**
<http://www.plannedparenthood.org/>
- **Sex, etc.**
<http://sexetc.org/>
- **Sexuality Information and Education Council of the United States (SIECUS)**
www.siecus.org
- **Stayyouth.org**
<http://stayyouth.org/>
- **The National Campaign to Prevent Youth and Unplanned Pregnancy**
<http://thenationalcampaign.org/>



Glossary

Adapted from: American Sexual Health Association (2014). Sexual Health Glossary; Cleveland Clinic (2012). Sexual Health: Glossary of Terms; Planned Parenthood (2014). Glossary; and WebMD (2014). Sex Glossary.

Abstinence – Choosing not to have any kind of sexual activity - this includes vaginal, oral and anal sex. Someone who practices sexual abstinence consistently does not run any risk of contracting an STI or having an unintended pregnancy.

Abuse – To treat in a harmful or injurious way. Abuse can be physical, sexual, or emotional.

Adolescence – The period of physical and emotional change between the beginning of puberty and early adulthood.

AIDS – An acronym for Acquired Immune Deficiency Syndrome. AIDS is caused by the human immunodeficiency virus (HIV). AIDS attacks the immune system so that the body can't fight off infection. There's no cure or vaccine for this disease. (See also *HIV*).

Anal sex – When a person puts their penis or an object inside someone's anus. Also called anal intercourse. (See also *Intercourse*).

Anatomy – The structural make-up of organisms (what we are made up of); body parts.

Antibiotics – Drugs that kill certain infection-causing bacteria.

Anus – The small opening in a person's buttocks through which solid waste (feces/poop) exits the body. Also called "butt hole."

Bacteria – Bacteria are one kind of microscopic (too small to see) germ. Some bacteria are not harmful while others can cause disease.

Bacterial STIs – Sexually transmitted infections that are caused by a type of bacteria. These include chlamydia, gonorrhea, syphilis, and nongonococcal urethritis.

Balls – Slang for "testicles," two ball-like glands inside the scrotum that produce sperm and hormones, including testosterone. (See also *Testicles*).

Barrier methods – Contraceptives that block sperm from entering the uterus. These are the condom, female condom, diaphragm, cervical cap, and sponge.

Birth control – Behaviors, devices, or medications used to avoid unintended pregnancy.

Birth control pills – An oral contraceptive that a woman takes to prevent an unintended pregnancy. It prevents the ovaries from releasing an egg each month and makes the mucus in the cervix thicker so that it's harder for sperm to travel into the cervix.

Birth defects – Serious conditions that are present at birth and involve changes to the structure of one or more body parts.

Blow job – Slang for oral sex performed on a male, the sexual act of using the tongue and mouth to stimulate the penis and testicles. (See also *Oral sex*).

Body/bodily fluids – Liquids originating from inside the bodies of living people. In terms of sexual health, bodily fluids usually refer to semen, vaginal fluids, and sometimes blood or breast milk.

Cervical cap – A rubber or silicone cup that is intended to fit securely on the cervix. Used with contraceptive jelly, the cervical cap is a barrier method of birth control that is reversible and available only by prescription. The FemCap is the only cervical cap currently available in the U.S.

Cervical mucus – The secretion from the lower end of the uterus into the vagina. It changes in quality and quantity throughout the menstrual cycle, especially around the time of ovulation.

Cervix – The narrow, lower part (neck) of the uterus, with a narrow opening connecting the uterus to the vagina. The cervix dilates to allow the passage of a baby during vaginal birth.

Chlamydia – One of the most common sexually transmitted infections. Caused by bacteria and spread by having unprotected vaginal, anal, or oral sex with someone who is infected, even though they may not have any symptoms.

Circumcised – A description of a penis from which the foreskin has been removed.

Circumcision – A surgical procedure that removes the foreskin of the penis.

Clinician – A qualified health care professional, such as a doctor, nurse, nurse practitioner, or physician assistant. Also called “health care provider.” (See also *Health care provider*).

Clitoris – A sensitive pea-sized organ that is situated above the urethra in women. The clitoris is sensitive when touched and plays an important part in a woman’s sexual arousal and orgasm. Its sole purpose is pleasure.

Comprehensive sexuality education – A medically accurate curriculum or classroom experience that provides young people with positive messages about sex and sexuality as natural, normal, healthy parts of life. Includes information about abstinence, condoms, safer sex protection, relationships, and communication.

Condom – A male condom is a sheath of thin rubber, plastic, or animal tissue that is worn on the penis during vaginal, anal, or oral sex. It is an over-the-counter, reversible barrier method of birth control, and it also reduces the risk of contracting some sexually transmitted infections. Also called “external condom.” (See also *Female condom*).

Consent – When a person agrees, gives permission or is accepting of something being done or planned by someone else. The person who consents does so without being forced, pressured, or coerced.

Contraception/contraceptive – Any behavior, device, medication, or procedure used to prevent pregnancy.

Cowper’s Glands – The glands beneath the prostate gland that are attached to the urethra. They produce a fluid, pre-ejaculate/pre-cum, that prepares the urethra for ejaculation. Also called “bulbourethral glands.”

Crabs – Slang for “pubic lice,” tiny insects that can be sexually transmitted. They live in pubic hair and cause intense itching in the genitals or anus (See also *Pubic lice*).

Cum – Slang for the act of ejaculating (also called “come”) and for semen or vaginal fluids that are released during ejaculation. (See also *Ejaculate*, *Ejaculation*, and *Female ejaculation*).

Cure – To eliminate a disease, condition, or injury with medical treatment.

Dental dam – A square of latex used as a barrier for safer sex during oral or anal sex to prevent body fluids from passing from one person to another and prevent skin-to-skin contact.

Depo-Provera – Also known as “The Shot,” Depo-Provera is the brand name of a progestin, DMPA (depot medroxyprogesterone acetate), that is injected into the muscle tissue of the buttock or arm every 12 weeks to prevent pregnancy. It is a reversible method of birth control available only by prescription.

Diaphragm – A form of contraception. A diaphragm is a soft, rubber cup that fits over a woman's cervix to prevent sperm from entering the uterus.

Douching – Spraying water or other solution into the vagina.

Egg – The reproductive cell in women; the largest cell in the human body.

Ejaculate – The fluid that is expelled from a man's penis during sexual climax (orgasm). (See also *Female ejaculation*).

Ejaculation – The moment when semen spurts out of the opening of the urethra in the glans of the penis. (See also *Female ejaculation*).

Emergency contraception – Hormonal birth control pills used to prevent pregnancy after unprotected vaginal intercourse. Must be started within 72 hours (three days) of intercourse. Also called “EC.” IUDs can also be used as EC if inserted within five days of unprotected intercourse.

Endometrium – The lining of the uterus that develops every month in order to nourish a fertilized egg. The lining is shed during menstruation if there is no implantation of a fertilized egg.

Erect – The description of a penis when it is filled with blood. Also called “hard.” Nipples and the clitoris may also become erect with stimulation.

Erection – A hard penis when it becomes full of blood and stiffens.

Estrogen – A hormone commonly made in a woman's ovaries. Estrogen's major feminizing effects are seen during puberty, menstruation, and pregnancy. Generally thought of as the female hormone, although males do produce some estrogen.

Female – The biological sex that provides the egg for sexual reproduction.

Female condom – Also called “internal condom.” A polyurethane pouch with flexible rings at each end that is inserted deep into the vagina. It is an over-the-counter, reversible barrier method of birth control that provides protection against many sexually transmitted infections. May also be used for anal intercourse.

Female ejaculation – The spurting of fluid out of the urethra during intense sexual excitement or orgasm. The fluid is most likely secreted by the Skene's glands, which are located in the vulva near the opening of the urethra. Female ejaculation may be associated with stimulation of the G-spot and occurs in 1 out of 10 women.

Fertility rate – The number of live births per 1,000 women of reproductive age (15-44).

Fertilization – The joining of a man's sperm cell and a woman's egg cell. If the fertilized egg gets to the uterus and implants in the uterine wall, then pregnancy begins.

Foreskin – A retractable tube of skin that covers and protects the glans (head) of the penis on an uncircumcised man.

Gender – The state of being male or female (typically used with reference to social and cultural differences rather than biological ones).

Gonorrhea – A sexually transmitted infection caused by bacteria that is transmitted during vaginal, anal, or oral sex with an infected person. Also is called "clap" or "drip."

G-spot – Short for Gräfenburg spot, an area of tissue thought to be located about one-third of the way along the front wall of the vagina. Stimulation of the G-spot leads to intense sexual arousal and orgasm in some women, and is also associated with female ejaculation.

Health care provider – A medical doctor, nurse, nurse practitioner, nurse-midwife, or physician assistant. (See also *Clinician*).

Hepatitis – A disease involving inflammation of the liver.

Hermaphrodite – A rare condition in which someone is born with both female and male sex organs. "Intersex" is now the preferred term. (See also *Intersex*).

Herpes – An infection of herpes simplex virus types 1 or 2 in the area of the anus, buttocks, cervix, mouth, penis, vagina, or vulva. The most common symptom is a cluster of painful blistering sores, although a person may have no symptoms.

HIV – Human immunodeficiency virus, an infection that weakens the body's ability to fight disease and can cause AIDS.

Hormonal contraceptive – Prescription method of birth control that uses hormones (estrogen and/or progestin) to prevent pregnancy. These include the implant, the Mirena IUD, the patch, the pill, the ring, and the shot.

HPV – Human papillomavirus. Any of more than 100 different types of infection, some of which may cause genital warts. Others may cause cancer of the anus, cervix, penis, throat, or vulva.

Hymen – A thin fleshy tissue that stretches across part of the opening to the vagina.

Immune system – The body's natural defense system against infection or disease; a system of cells that protects the body from bacteria, viruses, toxins, and other foreign substances.

Implant – A thin, flexible plastic implant about the size of a cardboard matchstick. It is inserted under the skin of the upper arm. It contains and constantly releases a progestin that prevents ovulation and fertilization. Can be used for up to three years to prevent pregnancy. The implant is a reversible hormonal method of birth control available only by prescription. Implanon is the brand name of the implant.

Implantation – Attachment of a fertilized egg to the wall of the uterus.

Intercourse – Sexual activity in which the penis or an object is inserted into the vagina or the anus. (See also *Vaginal sex* and *Anal sex*).

Intersex – A condition in which a person is born with reproductive or sexual anatomy that does not fit the typical definitions of female or male.

IUD – Intrauterine device. A small, plastic or copper, flexible, T-shaped device that is placed into the uterus to serve as a long-acting, reversible form of birth control.

Labia – The inner and outer folds of flesh that cover a female's vagina and urethra. Also called "lips." The outer pair (labia majora) is larger and hair grows on them, while the inner pair (labia minora) is smaller and made of a mucous membrane.

Lambskin – A natural material composed of a thin layer of sheep intestine. Used as an alternative to latex or polyurethane. Lambskin condoms provide pregnancy protection, but they do NOT prevent sexually transmitted infections.

Latex – A durable rubber material. Male condoms are often made out of latex.

Lesions – A region in an organ or tissue that has suffered damage through injury or disease. A skin lesion is a part of the skin that has an abnormal growth or appearance compared to the skin around it. Some sexually transmitted infections may cause skin lesions.

Lubricant – In females, the slippery liquid that is secreted from the walls of the vagina and the Bartholin's glands during sexual arousal in order to facilitate vaginal intercourse. In men, the slippery liquid secreted by the Cowper's glands in order to facilitate ejaculation and motility of sperm. (See also *Pre-ejaculate* and *Pre-cum*). Also, an oil-based, water-based, or silicone-based product used to increase slipperiness during anal or vaginal intercourse or other sexual activity (See also *Water-based lubricant*).

Male – The biological sex that produces the sperm for reproduction.

Masturbation – Touching one's own body and sex organs for sexual pleasure.

Menstrual cycle – The time from the first day of one period to the first day of the next period. In women of reproductive age, about 15–44, it is the period in which the lining of the uterus is shed whenever implantation does not happen, followed by the re-growth of the lining of the uterus in preparation for implantation.

Menstruation – The periodic discharge of blood from the uterus through the vagina occurring at more or less regular intervals during the life of a woman from age of puberty to menopause. Also called a "period." (See also *Period*).

"Micro" tears – Tiny abrasions or tears caused by the friction that is typically associated with sexual intercourse.

Miscarriage – The loss of a pregnancy before 20 weeks gestation; before the embryo or fetus can live outside the uterus. Also called "spontaneous abortion" or "early pregnancy loss."

Morning-after pill – Emergency hormonal contraception that is used within 72 hours after unprotected vaginal intercourse to decrease the risk of unintended pregnancy. (See also *Emergency contraception*).

Nongonococcal urethritis (NGU) – An inflammation of the urethra that is not caused by gonorrhea. Often caused by chlamydia.

NuvaRing – The brand name of a ring that contains hormones and is inserted in the vagina to prevent pregnancy. NuvaRing is a reversible hormonal method of birth control available only by prescription. Also called "The Ring."

Opportunistic infections – Infections – bacterial, cancerous, viral, etc. – that take advantage of the body's lack of immunity and can cause death in those whose immune system is weakened.

Oral sex – A sexual act that uses the mouth and tongue to stimulate the penis, testicles, vagina, vulva, labia, and/or anus.

Ovarian cyst – A growth on an ovary, usually small, fluid-filled, and not cancerous. May cause abdominal pain or irregular periods. Most often resolves on its own.

Ovaries – The two organs that store eggs in a woman's body. Ovaries also produce hormones, including estrogen, progesterone, and testosterone.

Ovulation – When an egg is released from an ovary.

Parasite – An organism that lives on or in a host and gets its food from or at the expense of its hosts. Can cause disease in humans.

Parasitic STIs – Sexually transmitted infections that are caused by parasites. These include pubic lice (crabs), scabies, and trichomoniasis.

Patch – The birth control patch is a thin, beige, plastic patch that sticks to the skin. It is used to prevent pregnancy. A new patch is placed on the skin once a week for three weeks in a row, followed by a patch-free week. Commonly called "Ortho Evra," its brand name.

Penis – A man's reproductive and sex organ made of soft spongy tissue and blood vessels. Urine and semen pass through the penis.

Perfect use – The effectiveness of a particular contraceptive method for individuals who always use it consistently and correctly. (See also *Typical use*).

Period – Slang for "menstruation," the periodic discharge of blood from the uterus through the vagina occurring at more or less regular intervals during the life of a woman from age of puberty to menopause. (See also *Menstruation*).

Physiology – The process or systems of living organisms; how the body works.

Plastic wrap – Household plastic wrap can be used as a barrier during oral sex on the vulva/vagina or anus. Plastic wrap does NOT work as an effective barrier for oral sex on a penis. (See also *Dental dam*).

Polyurethane – A durable plastic-like material that is an alternative to latex. Most female condoms and some male condoms are made out of polyurethane.

Postponement – Postponing sex means that a person makes the decision to NOT have sex or to put sex "on hold." Whether or not the person has been sexually active in the past, anyone can choose to postpone sex at any point in their lifetime.

Pre-cum – Slang for "pre-ejaculate," the liquid that oozes out of the penis during sexual excitement before ejaculation; produced by the Cowper's glands. Does not contain sperm, but may pick up sperm remaining in the urethra from previous ejaculations. (See also *Pre-ejaculate*).

Pre-ejaculate – The liquid that oozes out of the penis during sexual excitement before ejaculation; produced by the Cowper's glands. Does not contain sperm, but may pick up sperm remaining in the urethra from previous ejaculations. Also called "pre-cum."

Pregnancy – The period of time during which a woman carries a developing offspring in her uterus. It lasts about nine months from implantation to birth.

Progesterone – A hormone produced in the ovaries of women that is important in the regulation of puberty, menstruation, and pregnancy.

Progestin – A synthetic progesterone.

Protected sex – Precautions people take to reduce the risk of getting sexually transmitted infections, including HIV, and having an unintended pregnancy. (See also *Safer sex protection*).

Puberty – The time between childhood and adulthood when girls and boys mature physically, emotionally, cognitively, and sexually.

Pubic bone – One of the bones that make up the pelvis. It is covered by a layer of fat and is situated at the v-shaped area between the legs.

Pubic lice – Tiny insects that can be sexually transmitted. They live in pubic hair and cause intense itching in the genitals or anus. Also called “crabs.”

Rectum – The lowest end of the intestine before the anus, where solid waste (feces/poop) is stored.

Relationship abuse – A pattern of abusive and coercive behaviors used to maintain power and control over another person, usually a former or current intimate/dating partner.

Reproduction – The process by which plants and animals give rise to offspring.

Reproductive system – A system of sex organs within an organism which work together for the purpose of sexual reproduction.

Risk behaviors – Behaviors that may cause danger or harm to an individual and others. Some examples include drug use, binge drinking, and unprotected sex.

Route of entry – The way in which a substance or organism enters the body.

Safer sex protection – Methods or ways in which people reduce the risk of getting sexually transmitted infections, including HIV, and having an unintended pregnancy. (See also *Protected sex*).

Scabies – A very itchy rash caused by tiny mites that burrow or dig under the skin.

Scrotum – A sac of skin, divided into two parts, enclosing the male testicles, epididymis, and part of the vas deferens.

Self-harm – Intentional direct injuring of body tissue most often done without suicidal intentions.

Semen – Fluid containing sperm that is ejaculated during sexual excitement. Semen is composed of fluid from the seminal vesicles, fluid from the prostate, and sperm from the testicles.

Seminal fluid – A fluid that nourishes and helps sperm to move.

Sex – A person’s biological identification as female, male, or intersex. Also any voluntary sexual activity, with or without a partner.

Sexual – Relating to, or associated with sex organs.

Sexual activity – Practices or behaviors by which humans experience and express their sexuality.

Sexual health – Enjoying emotional, physical, and social well-being in regard to one’s sexuality, including free and responsible sexual expression that enriches one’s personal and social life and fulfills one’s sexual rights.

Sexually transmitted disease (STD) – A sexually transmitted infection that has developed symptoms. Also called “sexually transmitted infection.” (See also *Sexually transmitted infection*).

Sexually transmitted infection (STI) – An infection that is usually passed from one person to another during sexual or intimate contact. Also called “sexually transmitted disease.”

Side effect – A secondary, typically undesirable, effect of a drug or medical treatment.

Sliding fee scale – Variable costs for products or services based on one's ability to pay.

Sperm – The reproductive cells in men, produced in the testicles.

Spermicides – Chemicals used to immobilize and kill sperm.

Sponge – A form of contraception that acts as a barrier to keep sperm from entering the uterus. It also contains spermicide which kills sperm. A woman puts it into her vagina before vaginal sex. Sponges can help prevent pregnancy but do not protect a man or a woman from getting STIs.

Spotting – Usually, light bleeding between menstrual periods, which may only be seen on toilet paper after wiping.

STD – Short for "sexually transmitted disease," a sexually transmitted infection that has developed symptoms. Also called "STI." (See also *STI* and *Sexually transmitted infection*).

Sterilization – Surgical methods of birth control that are intended to be permanent; blocking of the fallopian tubes for women or the vas deferens for men. (See also *Tubal ligation* and *Vasectomy*).

STI – Short for "sexually transmitted infection," an infection that is usually passed from one person to another during sexual or intimate contact. Also called "STD." (See also *Sexually transmitted infection*).

Suppository – A type of spermicide that is shaped like a cone or cylinder that is inserted into the vagina where it dissolves.

Syphilis – A sexually transmitted infection caused by bacteria that, without treatment, can lead to heart disease, nerve disorders, brain damage, mental disorders, blindness and death.

Testicles – Two ball-like glands inside the scrotum that produce sperm and hormones, including testosterone. The testicles are sensitive to the touch. Also called "testes."

Testosterone – An androgen that is produced in the testicles of men and in smaller amounts in the ovaries of women. Generally thought of as the male hormone.

Treatment – Medical care given to a patient for an illness or injury. Treatments can relieve symptoms of infection and in some cases can cure it.

Tubal ligation – A permanent method of birth control that involves surgically blocking the fallopian tubes. (See also *Sterilization*).

Typical use – The effectiveness of a particular contraceptive method for individuals who do not always use it consistently or correctly. (See also *Perfect use*).

Uncircumcised – Description of a penis that has foreskin.

Unprotected sex – Sexual activity engaged in without precautions to prevent unintended pregnancy and/or sexually transmitted infections.

Urethra – The small tube that carries urine (pee) from someone's bladder to the outside of his or her body. The opening to the urethra for a male is the hole at the tip of the penis. The opening to the urethra for a female is just above the opening to the vagina.

Uterine fibroids – Noncancerous (benign) tumors that develop in the uterus.

Uterus – A hollow organ that is found inside the lower pelvic area of a female's body. It is connected to both of the fallopian tubes and to the vagina. This is the place where a fetus grows if a woman gets pregnant. Also called “womb.”

Vagina – The stretchable passage that connects a woman's outer sex organs, the vulva, with the cervix and uterus. The vagina has three functions: to allow menstrual flow to leave the body, to allow sexual penetration to occur (either by fingers/hand, sex toy, or penis), and to allow a fetus to pass through during vaginal birth.

Vaginal discharge – A clear or whitish fluid that comes out of the vagina. The uterus, cervix or vagina can produce the fluid. A foul-smelling, yellow or green discharge is abnormal and should be evaluated by a health care provider.

Vaginal fluids – Secretions from the vagina including vaginal discharge and vaginal lubrication. (See also *Vaginal discharge* and *Lubrication*).

Vaginal sex – Sexual activity in which the penis enters the vagina. Also called “vaginal intercourse.” (See also *Intercourse*).

Vas deferens – A long, narrow tube that carries sperm from each epididymis to the seminal vesicles during ejaculation.

Vasectomy – A permanent sterilization procedure for men. Usually done in a physician's office, requires cutting and sealing the vas deferens, the tubes in the male reproductive system that carry sperm. A vasectomy prevents the transport of sperm out of the testicles. (See also *Sterilization*).

Viral STIs – Sexually transmitted infections that are caused by a virus. These include HIV, HPV (human papillomavirus), herpes, and hepatitis.

Virus – A small infectious agent that replicates only inside the living cells of other organisms.

Vulva – The area between a woman's legs where her external sex organs including the clitoris, labia, opening to the vagina, opening to the urethra, and two Bartholin's glands are located.

Water-based lubricant – A water-soluble product used to increase slipperiness during anal or vaginal intercourse or other sexual activity.

Yeast infection – Usually, a type of vaginitis caused by an overgrowth of the yeast, *candida albicans*. Yeast infections may also occur in the penis, scrotum, or mouth.



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