

# SEXPLORATION

## *Sexual Decision-Making*



When making any decisions regarding sex, it is important to have accurate information so you can make informed choices to help you decide what is best for you (and your partner). It is also important for you to be clear about your own needs and desires, based to a large extent upon your values. Communication with yourself and others is key to a healthy relationship and it allows people to make healthier lifestyle decisions. Communication should occur with your partner before engaging in any sexual activity. By having already negotiated many issues within the context of safer sex before the heat of the moment, your experience, at the time and later will be optimized.

- Of the 18.9 million new cases of STIs each year, 9.1 million (48%) occur among 15-24 year olds. Although 15-24 year olds represent only one-quarter of the sexually active population, they account for nearly half of all new STIs each year.
- Human papillomavirus (HPV) infections account for about half of STIs diagnosed among 15-24-year-olds each year.
- Half of new HIV infections (about 20,000) each year occur among youth aged 15-24.
- 82% of teen pregnancies are unplanned; they account for about 1 in 5 of all unintended pregnancies annually.

### **SAFER SEX**

Having safer sex is about negotiating relationships and enjoying sexual encounters (oral, anal, or vaginal) without sharing blood, semen, or vaginal fluids. Safer sex includes ways of minimizing risks of transmitting HIV and other sexually transmitted infections (STIs). It



also reduces the risk of pregnancy. The Safer Sex Menu (at the end of this article) provides you with a wide selection of ways to engage in safer sex.

**Some safer sex techniques include:**

- Abstinence
- Using a male or female condom correctly and consistently for anal or vaginal sex
- Using a latex barrier (i.e. condom or dental dam) for oral sex
- Getting tested regularly for HIV (6 months to one year)

**ABSTINENCE**

Abstinence is refraining from oral, anal, and vaginal sex. It is 100% effective in STI prevention of contracting or spreading of HIV and pregnancy prevention when used consistently and correctly. You can say no to vaginal sex, oral sex, and/or anal sex at any point in your life and in most situations. This may be an overall lifestyle decision, and it can also be based upon the circumstances as you experience them (e.g. time, place, person, or other situations). Sometimes people who have had sex previously, choose abstinence now. Because abstinence means different things to different people, it is important to talk with your partner before, during and after you decide to engage in any sexual activity. This clarification not only demonstrates respect for you and your partner, it will help in the decision process.

**THE ROLE OF ALCOHOL AND DRUGS**

While the content of this section describes a variety of factors central to making a sound decision, it is important to also highlight the role that alcohol and drugs can play within the overall context of "Sexploration." Specifically, alcohol and many drugs can cloud your thinking; decisions made while you are impaired are not necessarily sound decisions. However, the consequences of these decisions (e.g., pregnancy, disease) can be the same as if you were not impaired. Thus, it's important to make your decisions about what you want to do, and ways of maximizing protection and healthy decisions, when you are not under the influence of drugs or alcohol.



## **PROTECTION, PREGNANCY, AND PREVENTION**

### **Condoms**

If you engage in sex, condoms help to prevent pregnancy and sexually transmitted infections, especially when used consistently and correctly.

*Most condom failures are due to human error, so it is important to consider the following information when using condoms:*

- Store condoms in a cool, dry place, and out of direct sunlight.
- Use a new condom each time you have sex.
- Do not use condom if it is damaged, discolored, deflated, brittle, or sticky.
- Check the expiration date.
- Open the package carefully. NEVER use your teeth or scissors.
- Dab some water-based lube on the inside of a condom before putting it on to make it more comfortable and to help prevent breakage.
- Put the condom on the erect penis before you have intercourse or oral sex.
- Pinch the tip of the condom, leaving space for ejaculate, and gently squeeze this tip as you unroll the condom all the way down the shaft.
- After ejaculation, withdraw the penis while it is still erect; grasp the rim of the condom between the fingers and slowly pull out (with condom still on) so that no semen is spilled.
- Gently remove the condom from penis and discard in trash—don't flush it in toilet.

Condoms are available in various shapes, colors, flavors, textures, and sizes. Find the one that best fits you and your partner.

### **Female Condom**

The Female Condom (FC) was developed for women for protection during vaginal intercourse. It can also be an effective prevention measure for anal sex. When used consistently and correctly, the FC prevents pregnancy and protects against HIV and



other STIs. Made of polyurethane (a type of soft plastic), the FC creates a barrier between the penis and the vaginal canal.

***To use it:***

- Use a new FC each time you have sex.
- Check the expiration date before you use it.
- Hold the sheath at the closed end and pinch the inner ring so that it becomes long and narrow.
- Gently insert the inner ring end as far into the vagina as possible using your index finger to push the inner ring up until your finger reaches the cervix. It will not go in too deep or get lost inside your vagina.
- When in place, it will cover the opening of the cervix and line the vagina walls. The outer ring stays outside the vagina and provides extra clitoral stimulation.
- The FC can also be inserted 6 hours before sex.
- Before having intercourse, be sure that it hangs straight and is not twisted.
- Add water-based lube on penis and/or to the inside of the female condom to increase comfort and pleasure and to decrease noise.
- When the FC is used for anal penetration, slip out the ring and place it over the finger/dildo/penis. Add plenty of lube.
- After intercourse, twist the outer ring, gently remove the female condom and discard in the trash.

The Female Condom is available over the counter at most drug and grocery stores in the same section as male condoms.

## **Dental Dams**

Oral (or dental) dams are thin, square pieces of latex that prevent possible transmission of HIV and other STIs when placed over the clitoris, vulva, or anus for oral sex. Dams act as a barrier between the mouth and the vulva, or anus. Place the dam evenly over the area while holding the edges of the dam apart. Then you can pleasure your partner with your lips, tongue, and kisses.



You can make your own dams by folding a piece of non-microwavable plastic wrap in half. Or take a non-lubed or flavored condom, snip off the elastic ring, cut along one side using scissors, and flatten it into a rectangle. Do not reuse or flip over a dental dam or latex square after use.

## **Lubricants**

Lube is a gel-like, clear substance that helps reduce friction during sex, can help to prevent condom breakage, and can increase pleasure. Use a dab of lube inside the tip of a condom or on the condom-covered penis. Too much lube can get messy and can cause the condom to slip off. Water-based lubricants (such as KY Jelly and Astroglide) can be used with latex condoms. Silicone-based lubricants are also safe to use with all condoms and any latex products. They last longer than water-based lubes, but silicone-based lubes may be harder to wash off and may be more expensive to purchase than water-based lubricant.

Do not use oil-based lubricants with condoms since they cause latex breakdown, decreasing condom effectiveness. Some lubes contain the spermicidal, nonoxynol-9, which is used to kill sperm to help prevent pregnancy. Spermicidal lubricant can be used alone or in conjunction with a male condom. Spermicide, however, can irritate the vaginal walls, increasing discomfort and making women more susceptible to STIs.

Contraception is the use of either barrier or hormonal methods to prevent pregnancy. Male and female condoms are the only type of contraception that protects against both pregnancy and STIs.

## **Contraception**

There are many types of contraception on the market. Some of which include the birth control pill, diaphragm, contraceptive patch, Nuvaring, Depo Provera (injectable contraceptives), and the IUD (intrauterine device), to name a few. With so many choices, it is a matter of figuring out which method is best for you. It is also important to consider that all hormonal methods (i.e., the pill or the Nuvaring) require a prescription. It is important to remember that there are other methods of contraception that are effective against pregnancy but do not protect against HIV or other STIs. In this case, it is essential to use condoms and maintain an open line of communication as well as, practicing a monogamous relationship.



## **Emergency Contraception and Post Exposure Prophylaxis**

Emergency contraception (EC) or the 'morning after pill' may prevent pregnancy if a condom breaks or other birth control methods fail. If you are a survivor of rape, or have unprotected sex, or engage in other high risk behavior, or are a health care worker at risk for needle sticks, etc., emergency contraception or emergency post exposure prophylaxis (PEP) methods do not guarantee protection. EC does not work if pregnancy has already occurred, nor does it cause an abortion. A woman can take EC up to 5 days (120 hours) after unprotected intercourse or birth control failure. The sooner a woman takes EC, the more effective it is. If you are over 18 years old, EC is available over-the-counter at a local pharmacy. Call 1.888.NOT.2.LATE from anywhere in the U.S. to learn more about emergency contraception.

There is no cure for AIDS. In addition there is no proof that post-exposure prophylaxis (PEP) can actually work as a so-called "morning after" pill in humans exposed to HIV through sex or injection drug use (IDU). Avoiding internal exposure to HIV-infected blood, semen and vaginal fluids still remains the most effective way to remain HIV-negative. For HIV-negative people who are exposed to HIV, there may be a window of opportunity in the first few hours or days after exposure in which antiretroviral combination therapy may be able to prevent infection. Providing potent anti-HIV drugs to prevent infection might make sense biologically, but are far from definitive (see [thebody.com](http://thebody.com) for more information).

## **SEXUALLY TRANSMITTED INFECTION**

Sexually transmitted infections (also known as STDs) are infections that are most commonly transmitted through oral, anal or vaginal sex. Some STIs, like herpes, can also be transmitted through personal and/or skin to skin contact.

There are 3 types of STIs. Bacterial infections (i.e.: Syphilis and Chlamydia) are caused by bacteria and can be cured with proper treatment. Viral infections are caused by viruses (i.e., HIV and Hepatitis) and can not be cured but symptoms can be managed temporarily with medication. Treatment is available for viral infections to lessen the severity of some of the symptoms. Organisms can also cause STIs (i.e., pubic lice and scabies). These are usually cured by a pediculicide shampoo or lotion.

Genital warts, which arise from the Human Papillomavirus (HPV), are one of the most common STI's worldwide. Genital warts are soft, moist, or flesh colored and appear in the genital area within weeks or months after infection. As of very recently, there is a new Human Papillomavirus (or Genital Warts) vaccine called Gardasil. Gardasil is



available to prevent the onset of HPV and cervical cancer in women. This vaccine is recommended for women between 9 and 26 years old and if you are sexually active or not. Contact a medical professional for more information.

Most STIs are asymptomatic, which means that there may be no visible signs of an infection like discharge, pain during urination, or flu like symptoms. Because of this, it is important to get tested on a regular basis if you are sexually active. There is no one test for all STIs. Some can be detected in your blood and/or your urine. Others are detected by taking cultures with a cotton swab of fluid samples from your mouth, penis, vagina or anus. Ask your clinician to test for STIs during your regular check-up. Most local health departments offer free or reduced fee testing and treatment for individuals with or without health insurance.

## **CONCLUSION**

This brief article on “Sexploration” has a wide variety of content. As highlighted at the beginning, this section has to do with personal decision-making and personal responsibility. Emphasized was the point that decisions about sexual involvement or non-involvement are based on your own values. Further emphasized is the fact that communication with a potential partner is vitally important for many reasons. The contents of this section are designed to promote greater awareness so you can make better informed decisions, and you can help others do the same.

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## **Reference**

Alan Guttmacher Institute. (2006). In Brief: Facts on American Teens' Sexual and Reproductive Health. Retrieved February 25, 2007 from [http://www.guttmacher.org/pubs/fb\\_ATSRH.html](http://www.guttmacher.org/pubs/fb_ATSRH.html)



## SAFER SEX MENU

### **Light Fare**

- Talking to each other about safer sex
- Kissing and hugging
- Back rubs, foot rubs, & body rubs while partially dressed
- Listening to music and/or dancing together
- Playing strip poker or spin-the-bottle
- Stroking, brushing, or playing with each other's hair
- Caressing, tickling, pinching, & nibbling each other through clothes
- Reading erotic literature together
- Looking at erotic pictures together
- Watching erotic movies on the VCR
- Talking sexy or fantasies
- Dry humping
- Showering together
- Kissing or licking or fondling (except for genitals or anus)
- Undressing each other or watching each other undress
- Rubbing any nonpetroleum-based body oil or lotion on each other or yourself

### **Entrees**

- Petting with no clothes on
- Mutual or simultaneous masturbation to orgasm with your hands (with or without condoms, with no exchange of semen or vaginal fluids)
- Mutual or simultaneous masturbation with a vibrator (no sharing!)
- Rubbing your penis against healthy, unbroken skin on your partner's body, between the breasts, lower thighs or buttocks, making sure not to ejaculate in or on your partner's body orifices
- Rubbing your vulva against healthy, unbroken skin on your partner's body, avoiding contact with your partner's body orifices



- Oral sex (fellatio) while wearing a condom
- Vaginal or anal penetration with a sex toy (no sharing!)

### **Desserts**

- Licking whipped cream or flavored nonpetroleum-based oil off your partner's body, except for unprotected body openings
- Masturbating while your partner watches or holds you
- Body painting with nonpetroleum-based body paints
- Eating breakfast, lunch, or dinner in bed
- Holding each other
- Sleeping together
- Starting over

Adapted from <http://oz.plymouth.edu/~women/safer.html>

