Making Sex Safer

Physical intimacy can be a healthy, natural extension of emotional intimacy. It can be exciting, pleasurable, and satisfying for all partners involved. Thoughtfulness, planning, communication, and responsibility can enhance the experience. Choosing to be sexually active requires that a person acknowledges the risks and takes precautions to protect themselves and their partner(s) from sexually transmitted infections (STIs) and/or an unintended pregnancy. It is important to make sexual intimacy as enjoyable and safe as possible.

What Is Safer Sex?
Safer sex requires knowing your needs and desires, respecting yourself and your partner(s), and practicing assertiveness and negotiation skills to stay healthy. This means talking about sex with your partner(s). For example, asking questions about STI testing, discussing what type(s) of protection to use, knowing how to protect yourself, and taking precautions every time are the first steps to ensuring safer sex. Safer sex does not mean eliminating passion and spontaneity; it means enjoying sex while reducing your risk.

What Are Sexually Transmitted Infections?
STIs are infections transmitted during unprotected sexual activity (including vaginal, anal, and oral) and sexual contact. The most frequently reported STIs among college students include chlamydia, gonorrhea, trichomoniasis, hepatitis A and B, syphilis, herpes, human papillomavirus (HPV), and human immunodeficiency virus (HIV), the virus that causes AIDS (acquired immune deficiency syndrome). Molluscum contagiosum, a skin infection, can also be transmitted through sexual contact. Some STIs, such as genital HPV, syphilis, and herpes, spread more easily through skin-to-skin contact. Most STIs show few or no symptoms, which causes people to transmit the infection without knowing they are infected.

What Are the Risks?
Engaging in unprotected sexual intercourse, which includes oral, anal, and vaginal sex, can put you and your partner(s) at risk. Regardless of your or your partner’s sexual preferences or gender identity, all types of unprotected sex can place you at risk for acquiring an STI.

Activities that involve direct exposure to a partner’s body fluids pose the greatest risk for transmitting an STI, especially HIV. Oral sex can transmit herpes, HPV, HIV, syphilis, hepatitis A, chlamydia and gonorrhea. Vaginal intercourse can transmit infections such as chlamydia, gonorrhea, herpes, hepatitis B, HPV, syphilis, trichomoniasis, and HIV. Anal intercourse is also risky behavior because the anus is prone to tearing, which could introduce an STI more easily to the receptive partner. Engaging in other sexual activities such as genital rubbing or “outercourse” may place you at risk for STIs (HPV, herpes, molluscum contagiosum, and syphilis) that can be transmitted through skin-to-skin contact. Contact with genital fluids from the vagina or penis, blood, and breast milk can transmit STIs and pose moderate risk. Fantasy, stroking, touching, and massage pose little risk. Vaginal sex between a man and a woman has the additional risk of unintended pregnancy.

How Do I Protect Myself?
The only way to completely eliminate your risk of an STI is to choose to not engage in certain sexual activities (anal, oral, and/or vaginal). Though these forms of sexual activity are commonly known to transmit STIs, genital rubbing or “outercourse” also pose a risk for certain STIs indicated above. If you do choose to have sex, it is important to protect yourself.

Making sexual intimacy enjoyable and safe while reducing risks for STIs involves consistently and correctly using a safer sex barrier method of protection, such as a male or female condom or latex dam. Barrier methods are less effective for infections transmitted through skin-to-skin contact (such as HPV, herpes, syphilis, and molluscum contagiosum) because the barrier method may not cover the entire affected area. Most forms of contraception, including hormonal contraceptives, do not protect you from STIs. The chance of acquiring or transmitting STIs increases when you have unprotected sex, no matter how many partners you have. Always take precautions, including communicating with partners and using safer sex barrier methods, whenever you have sex.

Communicating with your partner about your concerns, fears, desires, values, and choices is essential to making sex safer. Don’t be afraid to ask about your partner’s health and sexual history. Honest and open communication shows that you care and demonstrates respect for your partner, allowing you both to make informed decisions. But remember: it’s up to you to protect yourself in every sexual relationship. Don’t depend exclusively on communication to protect yourself from STIs. Your partner may not know or reveal things that could put you at risk.

Mutual agreement between partners will make you both feel comfortable and promote intimacy in your relationship. It is okay if you feel awkward or uncomfortable talking about sex. Sharing those feelings with your partner helps. Talking about sex can be easier if you are able to talk about other personal and emotional issues. Being intimate is much more than a sexual act. If discussions about relationships, emotions, or sex are difficult for you, seek counseling from others such as a health care provider, sexual health educator, parent, or someone you trust who can help you learn some important skills in communication.
**What Precautions Should I Take?**

- Get tested for STIs before engaging in sexual activity with a new partner.
- Express your needs, desires, and boundaries with your sexual partner(s). This is critical to practicing safer sex and for promoting a stronger relationship with your partner(s).
- Never mix alcohol or drugs with sexual activity.
- Be honest and be true to yourself.
- Choose lower-risk sexual activities, especially when you don’t know your partner’s STI or HIV status.
- Learn about how to protect yourself (see the sections on “Condoms,” “Latex Dams,” and “Lubricants” in this brochure).
- Many contraceptive methods do not protect you against STIs. Using condoms along with other birth control methods will not only reduce the risk of STIs, but also provide better protection against an unintended pregnancy if engaging in heterosexual vaginal intercourse.
- Vaccines against hepatitis A, hepatitis B, and HPV are available. Get vaccinated to prevent these diseases.

**Where Can I Get Help?**

Practicing safer sex can greatly reduce your chances of getting an STI, but sometimes infection may still occur. If you think you have been exposed to an STI, it is important to be examined, tested, and treated by a health care provider as soon as possible. Remember, some STIs have few or no symptoms; the only way to know for sure is to get tested. Getting tested and treated can prevent serious health risks and problems for you and your partner(s) later. Although not every infection can be tested for or cured immediately, a qualified health care provider can help you understand your risk and what to do about it.

People sometimes feel anxious, depressed, ashamed, or guilty about STIs. Don’t let your feelings stop you from getting help or from letting your partner(s) get help. Many people seek regular sexual health exams to decrease the likelihood of transmitting an infection. Remember STI testing is not always conducted in combination with your annual sexual health screening. Discuss these options with your health care provider. Medical treatment and information (sometimes free or at a low cost) are available from:

- college/university health centers
- public health departments or community health clinics
- private health care providers

The internet is a wonderful source of both information and misinformation. It is no substitute for a face-to-face visit with a health care provider.

**The Spectrum of Risk for HIV Infection**

While certain sexual activities have been found to result in more HIV infections than others, remember that it only takes one instance of sexual activity to transmit HIV. This risk continuum is simply a guide to help you make decisions about your own risks.

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**PrEP and PEP: Medications that Prevent HIV**

Pre-exposure prophylaxis (PrEP) is a prescription medication that is over 90% effective at preventing HIV when taken daily as directed. PrEP is usually prescribed to people who are at a higher risk for HIV (i.e., multiple partners, inconsistent barrier use, in a sexual relationship with someone who is living with HIV, shares needles, etc.). Talk with your health care provider about whether or not PrEP is right for you.

To find a PrEP provider near you, visit [https://preplocator.org](https://preplocator.org).

Post-exposure prophylaxis (PEP) is a prescription medication that can be taken up to 72 hours after a possible HIV exposure to prevent HIV. The sooner it is taken, the more effective it will be, so get to your health care provider as soon as possible if you think you need it.
Condoms

External or internal condoms are highly effective in preventing transmission of STIs if they are used consistently and correctly each and every time you have intercourse and/or if sharing sex toys.

There are a variety of condoms to choose from. There are many brands, styles, sizes, colors, flavors, and lubrication options to consider. Only latex, polyisoprene, or polyurethane condoms, labeled for HIV protection, should be used. Natural skin or animal membrane condoms are not effective because they are porous and can let STIs through. Try different brands and styles to decide which ones you prefer. (NOTE: Many campuses and community health centers provide condoms for free or at a reduced cost.)

Some condoms and vaginal contraceptives may still contain the spermicide nonoxynol-9 (N9). Nonoxynol-9 can irritate the vagina and rectum, which may increase a person’s risk for contracting HIV/AIDS from an infected partner. It is recommended that lubricated condoms be used without nonoxynol-9.

When Using External Condoms, Remember:

1. Check the expiration date and check for tampering or damage by feeling for an air bubble.
2. Safely open the condom with your fingers; to avoid damaging the condom, never tear the package open with teeth or sharp objects. Store condoms in a cool, dry place and avoid leaving them in your wallet, purse, or car for extended periods of time.
3. Roll the condom onto your thumb to ensure that the correct side is rolling down onto the penis or sex toy.
4. Use a reservoir-tip condom or leave 1/2” at the tip to collect the semen. Put a drop of water- or silicone-based lubricant inside the tip of the condom to increase pleasure. (NOTE: Oil-based lubricants can weaken latex condoms and should not be used.)
5. Pinch the tip of the condom and continue to do so as you unroll the condom slowly and carefully all the way down to the base of the penis or sex toy, smoothing out air bubbles. Have a spare condom available in case you break or tear the one you are using.
6. Put the condom on the erect penis or sex toy before the first contact with the vagina, anus, or mouth. If the penis is uncircumcised, pull back the foreskin before rolling the condom over the erect penis. If you have never used a condom before, you may want to experiment or get used to the feeling before using a condom with a partner.
7. Applying water- or silicone-based lubricant around the opening to the vagina or anus before intercourse in addition to lubrication applied to the outside of a condom reduces the chance of condom breakage.
8. After ejaculation, carefully withdraw the penis while it is still erect, holding onto the base of the condom to prevent slipping. Be careful not to spill the semen.
9. Dispose of the used condom in the trash. Never re-use condoms.

Latex Dams

Latex dams (also known as dental dams) are small sheets of latex rubber that may provide protection against transmission of STIs during cunnilingus (oral-vaginal contact) or rimming (oral-anal contact). They are used as a barrier between the body of one partner and the mouth of the other. If you use a latex dam, place a small amount of water- or silicone-based lubricant on the body part on which you will be performing oral sex, carefully hold the latex dam in place, and dispose of each sheet after use. If you don’t have a latex dam, use a condom cut open lengthwise or plastic wrap (non-microwaveable).

Lubricants

In general, lubricants can reduce friction, make sex more pleasurable, and help prevent a condom from breaking. Water- and silicone-based lubricants are available in a variety of flavors and consistencies that are specifically made for use with latex condoms. Water-based lubricants are safe for all types of sexual contact, including inserting a finger, penis and/or sex toy inside the vagina or anus. Silicone-based lubricant is longer lasting and safe for a variety of sex acts; however, it should not be used with a silicone sex toy due to degradation of the material.

Remember: use only water- or silicone-based lubricants. Oil-based lubricants can cause latex condoms to weaken and break, so avoid any oil- or petroleum-based lubricant, lotion, or cream (such as petroleum jelly, hand and body moisturizers, cooking oils, shortening, or baby oil).

Alcohol and Drugs

The use of alcohol and other recreational drugs does not cause STIs. However, alcohol and other drugs (prescription or illicit) are often linked with unsafe sexual behavior. Safer sex is smart, healthy, sober sex. Safer sex takes planning, thinking, and negotiating. Alcohol and other drugs can impair judgment, short-circuit thinking, and limit the ability to communicate effectively. Alcohol and other drugs may also inhibit the ability for a person to communicate and use safer sex barriers and lubricants. If alcohol or other drug use prevents you from practicing safer sex, you may want to consider seeking professional advice.

The use of alcohol and some other recreational drugs (including cocaine, marijuana, and club drugs) may suppress the immune system itself — making you more susceptible to infectious diseases in general. Learning how to keep alcohol and drugs out of sexual experiences is a key part of preparing for safer sex.
### What are the Most Common Sexually Transmitted Infections (STIs)?

Any of these STIs can be transmitted through sexual contact (vaginal, anal, and/or oral) with someone who has the infection, whether or not they have symptoms.

<table>
<thead>
<tr>
<th>STI</th>
<th>SYMPTOMS</th>
<th>PREVENTION and TREATMENT</th>
<th>POSSIBLE PROBLEMS</th>
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</thead>
</table>
| Chlamydia     | *Both Men and Women:* Rectal pain, discharge, or bleeding during receptive anal sex. Unprotected oral sex can cause infection in the throat.  
*Men:* Burning during urination (dysuria) and/or discharge from the penis  
*Women:* Dysuria, abnormal discharge, pain with intercourse, and/or abdominal pain | Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can prevent this infection from being transmitted. People who have had unprotected sex and their sexual partner(s) should be tested and/or treated with antibiotics. Failure to treat simultaneously may lead to reinfection. | Curable. If left untreated, women are at risk for pelvic inflammatory disease (PID, an infection of the fallopian tubes), and infertility, including an increased risk of ectopic (tubal) pregnancy. Every episode of PID increases a woman's risk of infertility. In men, infection of the prostate and epididymis, infertility, chronic pain, and fever can occur. |
| Gonorrhea     | *Both Men and Women:* Itching, soreness, bleeding during receptive anal sex and/or painful bowel movements. Unprotected oral sex can cause infection in the throat/sore throat.  
*Men:* Burning during urination (dysuria) and/or discharge from the penis  
*Women:* Dysuria, abnormal discharge, pain with intercourse, and/or abdominal pain | Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can prevent this infection from being transmitted. People who have had unprotected sex and their sexual partner(s) should be tested and/or treated with antibiotics. Failure to treat simultaneously may lead to reinfection. | Curable. If left untreated, women may experience PID and infertility, including an increased risk of ectopic (tubal) pregnancy. In men, infection of the prostate or epididymis and infertility can occur. Gonorrhea can spread to the blood and joints, a condition which could be life-threatening. Chronic pain and fever are also possible. |
| Syphilis      | Painless ulcer (chancre) appears at the location where syphilis entered the body, usually in the genital area**. Sores resolve on their own within six weeks. If left untreated progresses to the secondary stage which may include a rash and/or sores in the mouth, vagina, or anus. Rash may appear as rough, reddish brown spots on palms of the hands and/or bottoms of the feet. Other symptoms can include fever, swollen lymph nodes, sore throat, weight loss, and muscle aches. Late stage syphilis symptoms can include difficulty coordinating muscle movements, paralysis, numbness, gradual blindness, and dementia. | Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can reduce the likelihood of this infection being transmitted. However, because the infection occurs in the skin, the safer sex barrier method may not cover the entire genital area where bacteria are present. People who have had unprotected sex and their sexual partners should be tested and/or treated with antibiotics. Without treatment the damage already occurred cannot be reversed. | Curable. If untreated, the infection may affect the brain, the heart, pregnancies, or even be fatal. |
| Hepatitis A   | Flu-like symptoms such as fever, muscle soreness, fatigue, and abdominal pain can occur. Jaundice (yellowing of eyes and skin, dark urine) may also be experienced. | Preventable by hepatitis A vaccine. Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can prevent this infection from being transmitted. All people who have close household or sexual contact with an infected person should receive treatment. Practice proper hand hygiene. Can be treated but not cured. | Usually none. Hepatitis A typically goes away on its own. Persons with other underlying liver disease can develop liver failure. |
| Hepatitis B   | Flu-like symptoms (fatigue, nausea, and headache) and jaundice can occur. | Preventable by hepatitis B vaccine. Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can prevent this infection from being transmitted. Avoiding contact with blood and body fluids by not sharing toothbrushes, razors, or needles will prevent transmission. Diagnosis requires a blood test. Treatment is directed at relieving symptoms and maintaining nutrition. | Some people become chronic hepatitis B carriers, whether or not they continue to show symptoms of hepatitis B infection. In some cases, scarring of the liver, liver cancer, or, rarely, death may occur. |
| Herpes Simplex| **Types I and II**  
Cracked, raw, or red areas around the genitals** or mouth. Painful sores on genitals or buttocks. Herpes is also easily transmitted through contact with active blisters (also called sores or cold sores). Sores on either the genitals or mouth may be hidden or overlooked. Some people may have flu-like symptoms such as fever, body aches, and swollen glands. | Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can reduce the likelihood of this infection being transmitted. However, because the infection occurs on the skin, safer sex barrier methods may not cover the entire genital area where the infection is present. Avoid touching sores because contact with sores or body fluids can transmit to other areas of the body. Practice proper hand hygiene. Antiviral drugs can reduce the length, severity, and duration of outbreaks, as well as reduce the risk of transmission to partners. Treatable but not curable. | Recurrent outbreaks and chronic pain. Transmission to an infant can occur during childbirth and may cause severe neurological damage or death. Genital herpes can be severe in people with suppressed immune systems. |
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<td>HIV/AIDS</td>
<td>Flu-like symptoms lasting for about two weeks. Later symptoms may include chronic fatigue, diarrhea, weight loss, and rashes.</td>
<td>Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity, not sharing needles, taking some medications (PrEP or PEP), or being undetectable† can reduce the likelihood of this infection being transmitted. HIV can be passed from mother to child during pregnancy, birth, or breast-feeding. Obtain regular HIV testing. Some medications may slow down the course of HIV infection and prevent many complications. Treatable but not curable.</td>
<td>HIV causes a variety of conditions ranging from mild symptoms to severe life-threatening infections, cancers, and neurological problems (AIDS) if left untreated.</td>
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<tr>
<td>HPV</td>
<td>There are more than 40 HPV types that can affect the genitals**, mouth, and throat. Some types can cause genital warts that usually appear as bumps in the genital area. Other types may become more chronic and may develop into cancers of the vulva, vagina, anus, or throat.</td>
<td>Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity may reduce risk of transmission; however, because the infection occurs on the skin, the safer sex barrier method may not provide full coverage of infected areas. HPV9 vaccine may prevent the nine most common strains of HPV and may prevent HPV-associated cancers and genital warts. Although 90 percent of HPV cases will resolve on their own within two years, cryotherapy, laser, or chemical treatments can be used on genital warts. Sexually active women should receive regular cervical screenings to detect cervical or anal changes.</td>
<td>Precancerous changes or, if not detected and treated, cancer of the cervix, anus, vulva, vagina, cervix, penis, tongue, mouth, and throat.</td>
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<tr>
<td>Molluscum Contagiosum</td>
<td>Small, round, raised lesions with a dimple or pit in the center. Can appear anywhere on the body but primarily, located in the genital region**, thighs, abdomen, and chest. Usually painless and disappear within 6 to 12 months without treatment. The virus lives only in the skin so once lesions disappear the virus is gone and cannot be transmitted.</td>
<td>Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can reduce the likelihood of this infection being transmitted. Because the infection occurs on the skin, the safer sex barrier method may not provide full coverage of infected areas. Practice proper hygiene and refrain from sharing athletic equipment unless all lesions are covered. Treatments include removal of the growths with surgery or laser therapy, oral medications, and/or use of prescription creams on bumps.</td>
<td>A secondary bacterial infection can arise from scratching or scraping the affected area.</td>
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<tr>
<td>Trichomoniasis (&quot;Trich&quot;)</td>
<td>Men: Itching, irritation inside the penis, burning upon urination or ejaculation, discharge from penis. Women: Itching, burning, redness in genital region**, discomfort upon urination, and/or thin, odorous, abnormal discharge</td>
<td>Consistent and correct use of safer sex barrier methods* or abstinence from sexual activity can reduce the likelihood of this infection being transmitted. However, because the infection occurs on the skin, the safer sex barrier method may not provide full coverage of infected areas. Treatment consists of antibiotics for all partners and remaining abstinent until symptoms subside and antibiotics completed.</td>
<td>Curable. A possible increased susceptibility to other STIs due to genital inflammation can occur.</td>
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</tbody>
</table>

*Safer sex barrier methods are defined as internal or external condoms or dental/oral/latex dams. The use of lubrication with these methods assists with decreasing friction and increasing sensitivity for both partners.

** For the purpose of this brochure, “genitals” include the anus, vulva, penis, and all surrounding areas.

†If someone living with HIV is “undetectable,” it means they have a very low amount of HIV in their body because they are on treatment. When someone gets and stays “undetectable,” according to the CDC, “there is effectively no risk” of them “transmitting HIV to their HIV-negative sexual partners.”

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For More Information

**CDC Information**
(800) CDC-INFO, (800) 232-4636
TTY: (888) 232-6348
In English, en Español
www.cdc.gov/std

**Search for STI testing locations:**
gettested.cdc.gov

**Find PrEP providers:**
prelocator.org

American College Health Association
(410) 859-1500 | www.acha.org

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