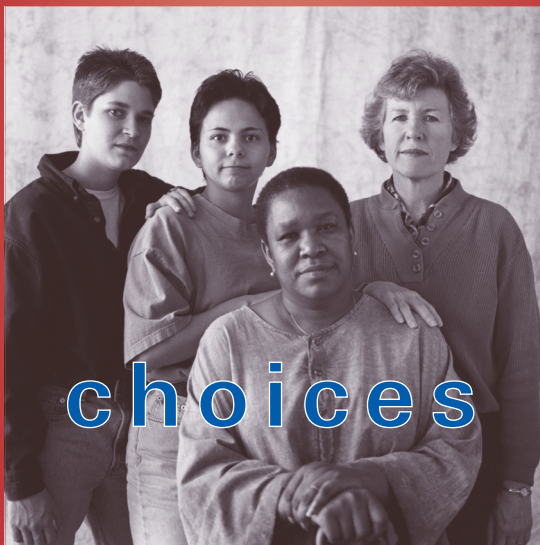


Women
and eN



HIV

We all have decisions to make about having or not having sex. Let's talk about some decisions that can work and feel right for us and our partners.

HOW CAN YOU GET AIDS?

Anyone can become infected with the human immunodeficiency virus (HIV) that causes AIDS. The virus doesn't care about age, sex or race... neither yours nor your partner's.

HIV is passed directly from one person to another via blood, semen, vaginal fluids or breastmilk. There are **three main ways** you can get it: by having **unprotected sex** with an infected person; by **sharing needles** or 'works' with someone who has the virus; or by being **born to, or being breastfed by, a woman who has HIV.**

WOMEN

HIV IS PASSED DIRECTLY FROM ONE PERSON TO ANOTHER VIA BLOOD, SEMEN, VAGINAL FLUIDS OR BREASTMILK.

HIV

decisions

You risk HIV infection if you have **vaginal sex without a condom**. You place yourself at even greater risk if you have **anal sex without a condom**. Anal tissues tear easily, allowing the virus to enter your bloodstream through small tears in the tissues. Oral sex (when the mouth is in contact with sexual organs) is less risky than unprotected vaginal or anal intercourse, but a few people have become infected with HIV in this way.

Woman-to-woman sexual contact is considered to be low risk. However, women who have had male partners, have used injection drugs, have had sex to become pregnant or have had artificial insemination for which the donor was unscreened, may have become infected with HIV. Contact with their blood or vaginal secretions is therefore risky.

During her period, an HIV-positive woman may be more likely to transmit the virus to others. Douching can make you more vulnerable to infection, because it washes away the natural vaginal fluids which offer some protection against disease.

If you shoot drugs, **you can become infected if you share a needle**, syringe, cooker, or other 'works' with a person who is infected.

Prior to November 1985, before screening of blood for HIV became routine in Canada, it was possible to get HIV from blood transfusions. Today, that method of transmission has been substantially reduced. If you had a **blood transfusion during the years 1978 to 1985**, you should consider being tested for HIV. A donated organ, bone marrow transplant or artificial insemination also carry a risk of HIV infection. If you need such a procedure, you should ask ahead of time whether the organ or sperm donor is screened for HIV.

The most common ways for women in Canada to become infected are through unprotected heterosexual sexual activity or sharing needles.

WHAT ABOUT TESTING?

The HIV antibody test does not detect the virus. It measures antibodies in your blood which your body makes to fight disease when exposed to infection.

A 'positive' HIV test result means that you have antibodies to HIV and are infected. This means you are seropositive and are capable of giving the virus to others. If you are HIV positive, it is good to know so that you can **protect others** and because **getting early treatment** can make a big difference to your health.

A 'negative' HIV test result indicates that no HIV antibodies have been found. This can mean that you are not infected, or that you are infected but that not enough antibodies have formed yet. **It can take three to six months** from the time of infection to develop detectable antibodies. You need to be tested again at least three to six months after you last had unprotected sex or shared needles.

CAN YOU TELL IF YOUR PARTNER IS INFECTED?

A person who is infected with HIV does not look any different. Most people who have a sexually transmitted disease (STD), including HIV, have no noticeable symptoms.

When Helen and Robert first met, they talked about everything except the fact that three years ago, he had shot up drugs and used someone else's needles. His past put him at risk for being infected with HIV now. When Helen and Robert had unsafe sex, she was taking a bigger chance than she realized.

The past behaviour of your sex partners — even ten years ago — may be a risk for you today. A direct question to your partner does not guarantee a true answer. **Many people infected with HIV do not know it themselves.** And even if they know they've been at risk, they may not be comfortable talking about it.

condoms

now

MOST PEOPLE WHO
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SYMPTOMS.

PROTECT

After living together for three years, Janet and Steve broke up. That's when Jane found out that Steve had been having sex with men — unprotected sex — before and during their relationship. She realized that Steve could have been infected and she might have been exposed to the virus.

If you have been separated from your partner and then get back together, it's best to assume you are at risk. You should practice safer sex for at least six months and then you can both be tested for HIV.

WHAT CHOICES DO YOU HAVE?

Because you can't be sure who has HIV and who doesn't, many women protect themselves at all times and with all partners.

The pill and some other methods of **birth control will not protect you** from STDs and HIV. **A latex condom is the best protection.** You can decide always to use condoms for vaginal or anal sex. It is safe to stop using condoms only if both partners test negative for HIV and only if both do not have any other sex or needle sharing partners.

There are some **other ways of having safer sex.** If you choose to have unprotected oral sex, you can try to avoid getting semen or vaginal fluid in your mouth. It is better not to floss your teeth for 30 minutes before having unprotected oral sex because flossing causes small cuts in the mouth which can let the virus enter your bloodstream. For similar reasons, you should also wait 12-24 hours after having dental work before having unprotected oral sex .

Protected oral sex would reduce the risk of STDs and HIV infection even more. To have protected oral sex, use a condom when the mouth is in contact with the penis or use a dental dam for contact of the mouth with the vulva and vagina. Dental dams are thin latex sheets and are available from some public health units, pharmacies and specialty condom shops. If you cannot obtain a dental dam, you can make one by cutting a condom lengthwise.

Sex toys, for example dildos, which are not shared, pose no risk of transmitting HIV. If they are used on more than one person, there is a risk of passing the virus from one person to another. This risk can be greatly reduced by covering the dildo with a new condom before each person uses it or by disinfecting it between uses.

You can choose not to have any penetration at all and find pleasure instead in massage, hugging, petting, mutual masturbation and erotic fantasizing.

If you shoot drugs, **use a new needle every time.** Have your own works and don't loan them. If you find yourself in a situation where no new needle is available, you can clean your works (see procedure on page 11). Ask the local public health unit about **needle exchange programs** and drug treatment programs near you.

If you are planning on having a baby, you and your partner may wish to consider having the HIV antibody test before pregnancy as it may influence your decision to get pregnant. If your partner is infected with HIV, you might become infected. About **one baby in four** born to an HIV positive woman in Canada is infected with the virus. There is also a chance of passing the virus to the baby by breastfeeding.

Advances in anti-HIV medications have substantially reduced the chance of passing the virus to the baby. Therefore it is important to know if you are HIV positive and to have medical care throughout pregnancy.

LIFE

THE PILL WILL NOT
PROTECT YOU FROM
STDs AND HIV.
A LATEX CONDOM
IS THE BEST
PROTECTION.

AIDS

safer sex

LIVING WITH YOUR CHOICES

Before Pauline had sex with David, they talked about using condoms. Pauline bought condoms and they used them the first few times they made love. Then David confronted Pauline saying, "You know I really care about you, and you know I'm clean. Come on, we don't need condoms any more. Trust me."

Women are more likely to use condoms on the first night than after a few weeks into the relationship. Somehow, as you get to know your partner better, you believe the risk of infection is less. And yet, nothing has changed since that first night as far as risk goes.

Buy your own condoms and learn how to use them. Talk to your friends. Think about ways in which you might raise the subject of condoms with a partner. Figure out what you would say to a partner who gives you a hard time about using condoms.

Mary was married for sixteen years before her divorce. She hadn't been with another man in eighteen years. Although she knew about STDs and HIV, and the importance of condom use, she didn't feel comfortable talking about condoms with a man. One night, she met Richard. After a few drinks made her feel more relaxed, they had a one night stand. No condoms were used, and she became infected.

Alcohol and drugs make it harder to think and act clearly. They lead to situations that you may not be able to handle and that can put you at risk for HIV infection.

TALKING WITH YOUR PARTNER

Whether you are 14 or 64 years old, you may find yourself talking about safer sex with your lover for the first time. It can be a difficult moment, funny or embarrassing. It can bring you closer together, or it can split you apart.

You can say no, and tell your partner you don't want to have sex unless it's safer sex. You can 'play safe' by **using protection or by avoiding penetration.**

If your partner says "Don't you trust me?", you can reply, "I do trust you, but either of us could have the virus and not know it." If the man says, "Condoms don't feel as good", you can say, "Let's try it a few times. It'll be more fun if I feel safer and can relax." Try a drop of lubricant inside the condom.

But, if your partner doesn't care or doesn't want to use a condom, then think twice about having sex. Your feelings are important. And your life might be at stake.

You have the right to decide whether to have sex, what level of risk you take and what sexual activities are right for you. You can **get support** from a counsellor or group in your community. Maybe you will decide to leave the relationship.

Women are more likely to protect themselves from pregnancy using methods that do not depend on partner co-operation, such as oral contraceptives, which do not protect them from HIV or other STDs. The female condom was introduced in the mid-1990s but to date results have been mixed as to its efficacy, affordability and interest in use. Further efforts are needed to develop and test other effective prevention methods.

CHOICES IF YOU ARE HIV POSITIVE

If you have tested positive for HIV, **you still have choices**. People with HIV are living longer all the time. There are some drugs that can slow down the progression of the disease so that you stay healthier for a longer time.

By having good medical and social support networks and by taking responsibility for your health, you can **maintain your health** and live a more satisfying life. You can choose to be sexually active and still protect loved ones. You cannot predict whether a new baby will have HIV, but you can make your own decision about whether you have enough support from family and friends to get pregnant and take on the responsibilities of having a child.

It's important to get the information you need to make your choices. There are networks developed by HIV positive women. Get in touch with one through a local AIDS organization or health clinic.

IT'S WORTH IT... YOU'RE WORTH IT

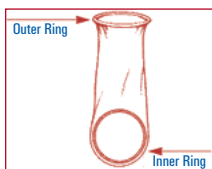
Living with the reality of HIV is a challenge to us all. Think about it. **Decide what your own needs are**. Talk with friends. **Practice what you can say** to your partner.

Do everything you can to avoid having sex or taking drugs with people who won't respect your right to make safe decisions. Find help if it's not working out. There are people who want to help you. **There are no second chances with HIV.**

For more information on STDs and HIV/AIDS or for local services, call:

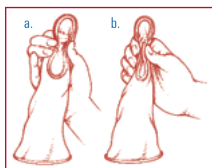
- a public health unit or CLSC,
- your health care provider,
- your local health centre,
- a women's centres,
- a family planning clinic,
- a testing clinic where your name will be kept secret,
- your local AIDS group, or
- an AIDS hotline (see page 12 for telephone numbers)

THE FEMALE CONDOM



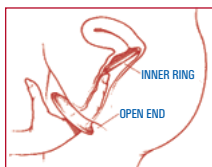
Open End (Outer Ring) Closed End (Inner Ring)

The open end covers the area around the opening of the vagina. The inner ring is used for insertion, and to help hold the condom in place.



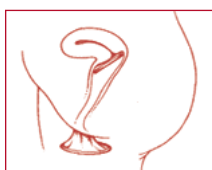
Hold the condom

- Hold inner ring between thumb and middle finger.
- Squeeze.
- Insert the inner ring into the vagina.



Insert the condom

Insert the condom as far as it will go. It's in the right place when you can't feel it. Don't worry – it can't go too far, and IT WON'T HURT!



Make sure placement is correct

Make sure the condom is not twisted. The outer ring should be outside the vagina



Removal

Remove before standing up. Squeeze and twist the outer ring. Pull out gently being careful not to spill semen. Throw it in the garbage, not in toilet. Use condoms only once.

CONDOMS HELP PROTECT YOU AND YOUR PARTNER FROM STDs AND HIV



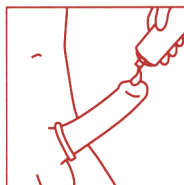
- Use latex or polyurethane condoms
- Check the expiry date on the package
- Heat and friction can damage condoms — keep them in a purse or jacket pocket
- Open the condom package carefully to avoid tearing



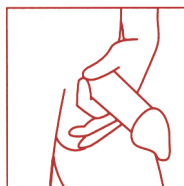
- Either partner can put the condom on the penis before any genital contact
- A drop of lubricant inside the tip of the condom will improve sensation
- Pinch the air from the tip of the condom to leave space for the semen — air left in the condom tip can cause it to burst



- Unroll the condom right down to the base of the erect penis



- Use a water-based lubricant to prevent the condom from deteriorating — avoid Vaseline® and oil-based products



- After ejaculating, pull out the penis while it is still hard, firmly holding the base of the condom
- Remove the condom, being careful not to spill semen
- Throw it in the garbage, not the toilet
- Use condoms only once

SAFER INJECTION DRUG USE

You can protect yourself and lower your risk by following some easy steps:

- Use a new fit every time you shoot up. You can get new needles from needle exchange programs in your area.
- Don't share, lend or borrow works.
- Don't handle or hold other people's works and don't let them touch yours.
- Clean your needles, syringes (rigs) and spoon/cooker properly if you must use them more than once.

HOW TO CLEAN YOUR WORKS...

If you can't get a new fit, here is how to clean your equipment (you must do all 3 steps):

1. Rinse out the blood

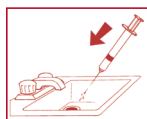
(you may not be able to see the blood)

Soak spoon (cooker) in water and shake it

Fill up syringe (rig)

Tap or shake syringe for 30 seconds

Empty syringe
Repeat with new water



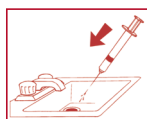
2. Disinfect with pure bleach

Soak spoon (cooker) in bleach and shake it

Fill up syringe (rig)

Tap or shake syringe for 30 seconds

Empty syringe
Repeat with new bleach



3. Rinse with fresh water

Soak spoon (cooker) in fresh water and shake it

Fill up syringe (rig)

Tap or shake syringe for 30 seconds

Empty syringe
Repeat with new water



Caution: Using bleach to clean needles may not kill the hepatitis C virus.

HIV/AIDS HOTLINES

Alberta	800-772-2437
British Columbia	800-661-4337
Manitoba	800-782-2437
Newfoundland	800-563-1575
New Brunswick	800-561-4009
Northwest Territories	800-661-0795
Nunavut	800-265-3333
Nova Scotia	800-566-2437
Ontario English	800-668-2437
Français	800-267-7432
Prince Edward Island	800-314-2437
Quebec	800-463-5656
	or contact your local CLSC
Saskatchewan	877-210-7623
Yukon	800-661-0507

**For more copies of this brochure
or other documents on HIV/AIDS, contact the
Canadian HIV/AIDS Clearinghouse
400-1565 Carling Avenue
Ottawa, ON K1Z 8R1**

 877-999-7740

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Canadian
Strategy on
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