
HIV and women – safer sex

Summary

- HIV is spread through body fluids including blood, semen, vaginal fluids, anal mucus and breastmilk, and from mother to child.
 - Safer sex is everybody's responsibility.
 - Many options exist for safer sex in relationships.
 - Talk with your doctor, health worker or HIV organisation about how you can practise safer sex.
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Thanks to new healthcare options available in Australia, there are now more ways than ever women living with HIV can enjoy sex. Knowing and choosing safer sex options, along with sexual health testing and early treatment of any sexually transmissible infections (STIs), can prevent HIV transmission and enable all women to enjoy healthy sex lives.

What is HIV?

HIV stands for human immunodeficiency virus. Over time and without treatment, HIV weakens the immune system so much that it struggles to fight off infections that it would normally be able to combat.

In Australia, HIV historically resulted in a diagnosis of acquired immune deficiency syndrome (AIDS) when the immune system became extremely weak. Today with many progressive advances in testing and treatment, most people living with HIV in Australia can expect to live long, healthy lives without ever developing AIDS, if they are under medical specialist care.

If you have recently been diagnosed with HIV visit [Next Steps](#) and the [HIV Hepatitis STI Education and Resource Centre](#) for more information.

How is HIV transmitted?

HIV is a blood-borne virus, which means it is carried in the blood and some body fluids. It can be spread from one person to another.

HIV is passed on from an HIV-positive person when blood, seminal fluid (semen), anal mucous, vaginal fluids or cervical fluids containing the virus enter the bloodstream of an HIV-negative person. Other bodily fluids such as saliva, sweat, urine, faeces, vomit, sputum or tears do not cause transmission or risk of transmission.

HIV can also pass from mother to child during pregnancy or birth, or via breastmilk.

There needs to be a certain concentration of the virus in the fluid for transmission to occur. The concentration of the virus in the bloodstream is referred to as a person's viral load, which is measured by the number of copies of the virus in a millilitre of blood (copies/mL). **Viral load** testing is a way to estimate how much HIV is in the blood. The lower the viral load of an HIV-positive person, the less likely they are to pass on the virus to someone else.

Sexually, the main way that HIV can be transmitted is by **condom-less anal or vaginal sex**. Transmission by oral sex is highly unlikely, and is only likely to happen if the person performing it has cuts, ulcers, or other bleeding in their mouth that would give the virus access to their bloodstream.

Any sexual practises involving blood and rough sex have an increased risk of transmission of HIV, hepatitis B and C and other blood borne viruses (contact the [Victorian AIDS Council](#) for more information). Transmission can occur from:

- blood to blood
 - body fluid to blood
 - blood to body fluid.
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Having another STI can increase the chance of HIV transmission occurring.

Other modes of transmission include:

- sharing needles or injecting equipment
- needle stick injury
- mother to child transmission during pregnancy, childbirth or breast feeding from a mother living with HIV.

How is HIV not transmitted?

HIV is not transmitted by:

- kissing, hugging, massaging, mutual masturbation and other body contact
- social interaction, such as shaking hands
- sharing food, dishes, utensils, drinking glasses
- air, breath, or being coughed or sneezed on
- mosquito or animal bites
- use of communal facilities such as seats, computers or touch screens, toilet seats, drinking fountains, spas, pools or gyms.

Statistics for HIV in Australia

In 2016 there were an estimated 26,444 people living with HIV in Australia, representing only 0.13 per cent of the population. Rates of HIV transmission were steady from 2011–2016, with 1,013 new diagnoses in 2016.

Of these 1,013 new diagnoses in 2016:

- 70% were in men who have sex with men
- 21% were in people who have heterosexual sex
- 5% were in people who engage in both male-to-male sex and injecting drug use
- 1% were due to injecting drug use alone.

HIV and options for enjoying sex safely

Options for enjoying sex safely include:

- condoms used with lubricant
- being on treatment or treatment as prevention (TasP)
- PrEP.

Condoms and lubricant

Using condoms and water-based lubricant (lube) during anal and vaginal sex is an effective way of preventing HIV transmission. Although oral sex is already very low risk for HIV transmission, using condoms on penises or dental dams on vulvas and anuses can reduce the risk of HIV and other sexually transmissible infections (STIs) from being passed on.

Things to remember about condoms and dental dams:

- Condoms and dental dams are for one-time use only.
- Make sure they are within their use-by date (if not, refresh your supply with new ones).
- Store them away from heat and direct sunlight.
- Be careful not to tear condoms with your teeth or nails when opening the packet.
- For **male condoms**:
 - Make sure the condom is the right way so it can be rolled down on an erect penis.
 - Pinch the teat of the condom as you place it over the head of your penis and roll it all the way down to the base.
 - Once sex is over, hold the condom at the base of the penis whilst pulling out. Hold onto the teat and

gently slide the condom off.

- For **female condoms**:
 - Squeeze the inner ring together into a shape that can be inserted into your vagina.
 - Once the inner ring is inside, use your fingers to push as high as you can, aiming for the small of your back, until it reaches the cervix.
 - The ring should naturally expand at the cervix and you shouldn't be able to feel it anymore.
 - The outside ring should hang about an inch outside of the vagina.
 - After sex, grasp the outer ring firmly and twist before gently pulling it out of your vagina.
- For **dental dams**:
 - Place the dam flat over the vulva or anus, covering the area you will be performing oral sex on.
 - Try not to stretch the latex too tightly, as this may cause it to tear.
- Don't flush used items down the toilet as you may cause it to clog. Simply wrap them in tissue and throw them in the rubbish.
- If in a group sex session, use a new condom for every new partner.
- If sharing sex toys, put a new condom on the toy before each person uses it.

Treatment as prevention

People living with HIV can help prevent HIV transmission by taking their prescribed treatment every day. This suppresses their viral load to fewer than 200 copies/mL. At that level it is virtually impossible to transmit the virus sexually. This is sometimes referred to as 'treatment as prevention' (TasP).

Often, HIV treatment reduces the viral load to such a low level that it becomes undetectable (known as an undetectable viral load, or UVL). This means that an HIV-positive person has such low levels of HIV in their body that current tests cannot detect it in their blood.

Using this method of 'treatment as prevention' is sometimes promoted as '**Undetectable = Untransmittable**' or **U=U**.

It is important to wait until viral load suppression is achieved before engaging in condom-less sex or any risky behaviour in order to be sure the treatment is working. This can be achieved with your treating HIV specialist. Remember that being on HIV treatment and having an undetectable viral load does not protect you from STIs, so if you are having casual sex, it's best to use condoms and lube. It is recommended that you test for STIs and check your viral load regularly.

The following pages provide more information about the science behind treatment as prevention:

- [Living Positive Victoria – UequalsU](#)
- [Prevention Access Campaign – Frequently asked questions.](#)

PrEP

PrEP stands for Pre-Exposure Prophylaxis. It is a pill that an HIV-negative person can take every day to protect themselves from HIV. The pills taken as PrEP are also the same medications taken by HIV positive people to help maintain a healthy immune system.

Studies have shown that if you take PrEP properly every day, it can reduce your risk of catching HIV by up to 99 per cent.

PrEP can cause some side effects such as an upset stomach, loss of appetite or mild headaches, but these tend to go away after a few weeks. PrEP isn't necessarily for everyone and is a personal choice, so speak to your GP to see if PrEP is right for you.

PrEP is a method of safer sex for any individual who decides it is a good option for them.

Important things to know about PrEP:

- Before starting PrEP:

- have an HIV test to ensure you are HIV-negative
- have a blood test to check your kidney function.
- PrEP does **not** protect against **STIs** such as chlamydia or gonorrhoea. Condoms and lubricant can provide protection against and reduce risk of spreading STIs.
- PrEP must be taken every day or as prescribed for maximum effective protection.
- It is important to have a **sexual health test** every **three months** while on PrEP.
- PrEP can have some side effects, so continue to work with you GP to monitor your general health.
- If you want to stop taking PrEP, make sure you continue taking it for 28 days after your last potential exposure to HIV.

As of 1 April 2018, PrEP is listed on Australia's Pharmaceutical Benefits Scheme (PBS), which means its cost is subsidised by the Australian Government.

Speak to your GP or sexual health clinician for more information, or visit the [Victorian AIDS Council](#) website.

If you have been exposed to HIV

PEP (post-exposure prophylaxis) is a 28-day course of antiviral medication. You can take it to prevent HIV infection if you have potentially exposed yourself to the virus (for example through condom-less sex, where a condom has broken or failed during sex, or through sharing injecting equipment).

Important things to remember about **PEP**:

- PEP **must** be started within **72 hours** of potential exposure.
- PEP **must be adhered to** properly and taken **every day** for the full 28-day course.
- PEP can cause severe side effects in some people such as nausea and vomiting, headaches, an upset stomach, diarrhoea or tiredness.
- PEP does not protect against other STIs.

If you think you have been exposed to HIV, do not wait for an appointment to see a GP. Call the **PEP info line** (Tel. 1800 889 887) in the first instance for guidance and information about where to find your closest PEP provider.

You can access PEP in Melbourne:

- Accident and Emergency at The Alfred Hospital – 55 Commercial Road, Melbourne, VIC 3004
- Prahran Market Clinic – Prahran Central Shopping Centre, 325 Chapel St, Prahran, VIC 3181
- Centre Clinic – 77 Fitzroy Street, St Kilda, VIC 3182
- Melbourne Sexual Health Centre – 580 Swanston Street, Carlton, VIC 3053
- Northside Clinic – 370 St Georges Road, Fitzroy North, VIC 3068.

GetPEP provides a comprehensive list of **places where you can get PEP throughout Victoria** and the rest of Australia.

Negotiating safer sex

Negotiating sex is not always easy, but it's important to feel confident and empowered to have the kind of sex you both want to have and feel comfortable having. Here are some tips that may help:

- Make your own decisions about how to protect yourself, and take whatever steps necessary to make that happen.
- Have condoms and water-based lubricant handy if you think there is a possibility that you will be having sex.
- Don't assume that your partner(s) will feel confident about using condoms. Everyone should learn how to use them correctly.
- Make it your business to find out about condoms. Condoms come in a range of different sizes, shapes, styles, colours and flavours to suit personal preferences and enhance pleasure. It is important to investigate what is best for you and your partner.
- Find out where you can get condoms without embarrassment.
- Have enough condoms and water based lubricant for each sexual partner. If you are engaging in group sex,

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partner swapping or sharing, remember that all new sexual partners require a new male or female condom and lubricant.

There are many great resources for negotiating safer sex which you can find by contacting one of the organisations below.

Women living with HIV and contraception

Find out about **your contraceptive choices** from your HIV treating doctor.

Some types of oral and internally placed contraceptives (and other drugs or medical devices containing hormones) can cause interactions with your HIV treatment. Other medications can interact with hormonal contraceptives, so it is important that whoever provides your contraception and HIV medical care knows about any other medication you take, including over-the-counter and herbal remedies.

When considering your contraceptive choices, things to think about include:

- whether a contraceptive is compatible with your HIV treatment
- how well a contraceptive method will suit your lifestyle
- how often you have to use a contraceptive
- if, and how soon, you want to become pregnant in the future
- how to protect yourself and your partner from infections
- the possible side-effects of different contraceptives.

HIV and injecting equipment and 'ChemSex'

Taking drugs in order to enhance sex (known as 'ChemSex'), has some specific sexual health risks.

If you have had ChemSex or have had a blood risk through injecting drugs, contact the **PEP line** (Tel. 1800 889 887) within 72 hours or contact your medical or sexual health clinic as soon as possible.

Sharing injecting equipment is high risk for HIV transmission.

Whether the injecting equipment is for prescription medication (such as insulin or warfarin), image enhancing drugs (such as steroids or tanning) or illicit drugs, always use new equipment and never share any equipment, including needles, syringes, spoons or water for injection.

For more information about reducing harm from drug use:

- visit Better Health Channel's fact sheet on **reducing harm from alcohol and other drug use**
- contact **Harm Reduction Victoria**.

HIV – your rights and responsibilities

It is **unlawful to discriminate against someone on the basis of HIV status** or related illnesses.

If you are living with HIV in Victoria, **you do not legally have to disclose your HIV-positive status** to sexual partners if you are using risk reduction methods, such as condoms and lubrication. **Other state and country laws may differ, so it's important to check.**

Sero different relationships

It is called a sero different (or serodiscordant) relationship when one partner in the relationship is HIV-positive and the other is HIV-negative. Both partners can have concerns through the relationship but there are ways to manage these, as long as there is honest and open communication.

Possible concerns of an HIV-positive partner:

- fear of transmitting HIV to their partner
- fear of rejection or abandonment
- health issues and illness
- effects of treatment and energy levels

- planning for the future
- disclosure and privacy issues in talking to others about the relationship and their HIV status.

Possible concerns of an HIV-negative partner:

- fear of contracting HIV from their partner
- guilt that their partner is HIV-positive and they are not
- feeling that if they had HIV too they'd feel closer to their partner
- fear of losing their partner to health issues and illness
- stigma about HIV and disclosing to friends and family that they are in a sero different relationship.

Get peer support from many Victorian Organisations, such as TIM (The Institute of Many), VAC, Living Positive Victoria and Straight Arrows.

Navigating the sero different relationship

If you are in a sero different relationship:

- Get educated together about sexual practices – what's risky and what's safer.
- Talk openly about what you feel comfortable with and what you don't, including the topic of monogamy and how you will communicate any relationship changes.
- Understand that HIV transmission isn't the only risk – be aware of STIs.
- Explore the option of treatment as prevention.
- Explore the option of PrEP for the HIV-negative partner.

Multilingual sexual health information

To access sexual health information in your language, contact the **Centre for Culture, Ethnicity and Health** on (03) 9418 9929.

Where to get help

- Your **GP (doctor)**
- Your local community health service
- **Family Planning Victoria** – comprehensive sexual and reproductive health services for people of all ages. Tel. **1800 013 952** or **(03) 9257 0100**
- **Melbourne Sexual Health Centre** Tel. **(03) 9341 6200** or **1800 032 017** or TTY (for the hearing impaired) **(03) 9347 8619**
- **Get PEP** If you believe you may have been exposed to HIV. Tel. **1800 889 887**
- **Living Positive Victoria** Tel. **(03) 9863 8733**
- **Positive Women Victoria** Tel. **(03) 9863 8747**
- **Victorian HIV Service, Alfred Health** Tel. **(03) 9076 5436**
- **Positive Living Centre** Tel. (03) 9863 0444 or **1800 622 795** (for country callers)
- **Multicultural Health and Support Service**, Centre for Culture, Ethnicity and Health Tel. **(03) 9418 9929**
- **Thorne Harbour Health** (formerly Victorian AIDS Council) Tel. **(03) 9865 6700** or **1800 134 840**
- **Equinox Gender Diverse Health Centre** Tel. **(03) 9416 2889**
- **PRONTO!** Tel. **(03) 9416 2889**
- **Ballarat Community Health Sexual Health Clinic** Tel. **(03) 5338 4500**
- **Bendigo Community Health Sexual Health Clinic** Tel. **(03) 5434 4300** Or **(03) 5448 1600**
- **Gateway Health Clinic 35**, Wodonga Tel. **(02) 6022 8888** or **1800 657 573**
- **Sunraysia Community Health Services** Tel. **(03) 5022 5444**
- **Barwon Health Sexual Health Clinic** Tel. **(03) 5226 7489**

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HIV and Hepatitis Resource Centre

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