Safe sex

Summary

- ‘Safe sex’ is sexual contact that doesn't involve the exchange of semen, vaginal fluids or blood between partners.
- If used correctly, condoms can dramatically reduce the risk of most sexually transmissible infections (STIs) and unintended pregnancy.
- Having regular STI screening and reducing the number of sexual partners also reduces the transmission risk of STIs.

Safe sex is having sexual contact while protecting yourself and your sexual partner against sexually transmissible infections (STIs) and unplanned pregnancy. Sexual contact that doesn’t involve the exchange of semen, vaginal fluids or blood between partners is considered to be safe sex. Unsafe sex may put you or your partner at risk of STIs such as chlamydia, gonorrhoea, syphilis, Mycoplasma genitalium, HIV or hepatitis B, or may result in an unplanned pregnancy.

Condoms and safe sex

Condoms offer the best available protection against STIs by acting as a physical barrier to prevent the exchange of semen, vaginal fluids or blood between partners. Safe sex is also called ‘safer sex’ to highlight the fact that condoms and other barrier methods are not 100 per cent effective in preventing STIs. However, condoms do offer the best available protection when used correctly.

For vaginal, anal and oral sex, you should use condoms. Points to keep in mind include:

- The male condom is a fine, strong, latex-rubber sheath available in a variety of sizes and styles. Condoms made from polyurethane are available for people allergic to latex.
- The female condom resembles a regular condom made of polyurethane, but is designed to fit inside the vagina. The female condom is pre-lubricated and is ‘one size fits all’.
- You should use other barrier methods – for example, condoms on vibrators and other penetrative sex toys, a latex glove for digital penetration of the vagina or anus, and a dental dam (a sheet of latex worn over the female genitals) during oral sex.
- Remember that a diaphragm (a cap worn high in the vagina to cover the cervix) offers good protection against pregnancy, but low protection against STIs.
- To be effective, condoms must be used from the start of sex to the very end as STIs can be transmitted via pre-ejaculate.
- Always use a new, lubricated condom every time you have sex. Check the use-by date and open the packet, being careful not to tear the condom with fingernails, jewellery or teeth.
- If you need extra lubricant, use only water-based lubricants. Other lubricants can damage the condom.

Effectiveness of condoms

Condoms, even when used correctly, don’t guarantee 100 per cent protection against STIs or unplanned pregnancy. Issues to consider include:

- Sex using a condom may still spread an infection if the condom does not fully cover the infected area. For example, some infections such as pubic lice, scabies, genital warts and herpes are spread by close skin-to-skin contact. Condoms provide some protection against these STIs, but not full protection as they do not cover the entire genital skin area.
- A condom may break, particularly if it has not been stored properly or the right lubricant has not been used.
This is why you should always use water-based lubricant. Oil-based lubricants are associated with condom breakage and should not be used. Do not expose a condom to prolonged heat. Don’t use a condom that is past its use-by date. Don’t try to re-apply a used condom – they are designed for one use only.

Other tips for safer sex
Safer sex is also about having sex when you and your partner are ready, and having sex that’s enjoyable, respectful and protected. Ways that you can practise safer sex include:

- Having sex with only one partner, when neither of you has any STIs, is the safest way to have sex.
- Be STI free by getting tested for common infections and having treatment if necessary, especially if you have a new partner. Avoid sexual contact until the doctor or nurse tells you that you are no longer infectious and until both you and you partner have been treated.
- Communicate with your sexual partner about what you want and enjoy sexually.
- Be aware that drugs and alcohol may affect your ability to make good decisions. Protect yourself from having sex that you might regret or were pressured into because you weren’t thinking properly.
- Use other types of contraception in addition to a condom to avoid unplanned pregnancy.

Safe sexual activities
Sexual contact that carries a low risk of STI transmission includes:

- kissing although recent studies have shown that deep throat kissing (French kissing) may be associated with the spread of gonorrhoea
- cuddling
- massage
- masturbation
- mutual masturbation
- ejaculating on unbroken skin
- sexual intercourse using barrier contraception – such as a condom or female condom.

High-risk or unsafe sexual activities
Unsafe sex outside of a monogamous relationship increases your risk of getting a STI. Examples of unsafe sexual activities include:

- having sex without a male or female condom
- withdrawing the penis before ejaculation instead of using condoms (pre-ejaculatory fluid may be infectious and can also contain sperm resulting in pregnancy)
- trying to re-use a condom or using a condom that is past its use-by date
- using a condom incorrectly or continuing to have sex once the condom is broken
- exchanging bodily fluids like menstrual blood, semen or vaginal fluids inside another person’s body (for example, mouth, vagina or anus).

Increasing the risk of unsafe sex
Some of the factors that can make unsafe sex more likely include:

- being drunk (which may lead to you being less careful)
- using recreational drugs
- feeling pressured to have sex
- thinking that it’s okay ‘just this once’
- believing that you can tell if someone has an STI because they will have symptoms.

Safe sex myths
Some people believe, or may try to persuade you of, various myths about safe sex, such as:
• Planning ahead for sex ruins the mood.
• You can tell by the way someone looks that they do or don’t have an STI.
• Practicing safe sex implies that one of us has an STI.
• Practicing safe sex implies that one of us is an intravenous-drug user.
• Lesbians don’t get STIs.
• Taking the pill means I practice safe sex.
• Condoms ruin the feel of sex.
• Buying condoms is embarrassing.

**Overcoming barriers to safe sex**

Safe sex doesn’t have to be a drag. Tips include:

• Be prepared for safe sex – it doesn’t have to be a passion-killer. Carry condoms in your wallet or purse and keep them handy at home, so that you don’t have to interrupt having sex to look for one.
• If you find condoms reduce the pleasure that you or your partner experience, drop a bit of water-based lubricant in the tip of the condom for extra feeling and sensitivity.
• Learn how to use condoms. They may take a little getting used to, but it’s better than catching an STI.
• Involve condoms in foreplay.
• If you feel too embarrassed to buy condoms in a pharmacy or supermarket, buy them from vending machines in some public toilets, from mail-order sites or grab a handful from a community health centre or sexual health centre.
• Hormonal contraceptives, such as the oral contraceptive pill, only provide protection against unplanned pregnancy. They provide no protection against STIs.
• Prioritise your sexual health – it is important.
• Don’t think you can tell if someone has an STI just by looking at them. Most STIs don’t have any obvious signs.
• Educate yourself about STIs. Anyone who has sex is at risk.
• Be mature about STIs and reassure yourself and your partner that an STI is not a moral judgement of character, but an infection like any other. Having an STI does not mean that you are ‘dirty’ or ‘cheap’.
• Have STI tests if you are in a relationship and you want to have sex without a condom. Both partners should be tested. Think of STI testing as a sign of respect for each other.

**What to do if you have unsafe sex**

If you have had unsafe sex:

• avoid vaginal or rectal ‘douching’ (washing out or irrigating these areas with water or other fluids) as the irritation to delicate tissues could increase the risk of infection
• make sure you are not at risk of pregnancy. Consider taking the emergency contraceptive pill (within 72 hours is best, but it can be taken with 120 hours of unprotected sex or a broken condom if no other form of contraception was used)
• see your GP promptly to be tested for STIs
• consider post-exposure prophylaxis (PEP) to prevent HIV, if you are a man who has had unprotected anal intercourse with another man. Call the PEP line to assess whether you require post-exposure prophylaxis.

**Where to get help**

• Your [doctor / GP](#)
• Your school nurse or school welfare coordinator
• Some secondary schools provide access to an [adolescent health trained GP on site](#)
• Your local community health service
• **Family Planning Victoria’s Action Centre** Tel. 1800 013 952 or (03)9660 4700 (also is youth friendly)
• **Family Planning Victoria** 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
• Thorne Harbour Health (formerly Victorian AIDS Council) Tel. (03) 9865 6700 or 1800 134 840
• The Centre Clinic, St Kilda Tel. (03) 9525 5866
• 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 1800657 573
• Sunraysia Community Health Services Tel. (03) 5022 5444
• Barwon Health Sexual Health Clinic Tel. (03) 5226 7489
• Victorian Supercare Pharmacies
• 1800MyOptions Tel. 1800 696784 is a statewide phone service for information about sexual health as well as contraception and pregnancy options

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