

Keeping It Safe-

A sexual and reproductive health guide for
same sex attracted women



Consent Safer Sex

Let's talk about sex...

Family Planning NZ

Penetration

Keeping It Safe-



This resource is for any woman who has sex with women, occasionally, regularly or is just thinking about it.

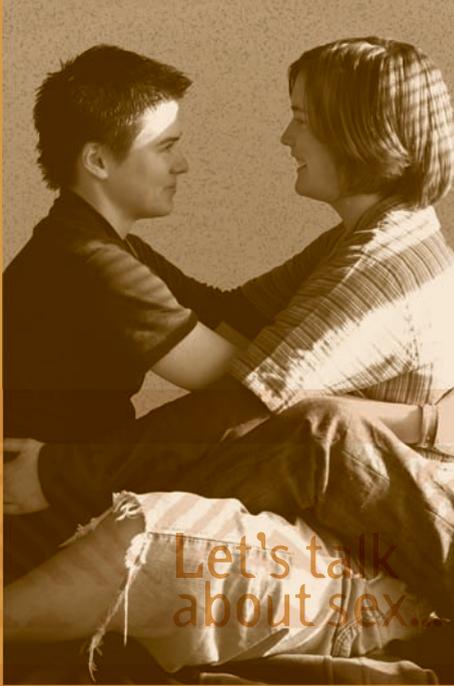
It aims to provide information to all women who have sex with other women, regardless of how you identify (e.g. as lesbian, queer, bisexual, gay, straight, butch, femme, dyke, or nothing) or how that may change over time.

It aims to help us make informed choices about our sexual practices, whoever they may be with.

We acknowledge that same sex attracted women have a wide range of different sexual experiences and desires.

We have based this resource on the premise that the risks of sexually transmissible infections relate to behaviours not sexual orientation or identity.

For an expanded version of this resource refer to <http://www.fpanz.org.nz>



Let's talk about sex...

Communicating about sex is important, whether you are in a long-term monogamous relationship, specialise in a series of one night stands, or are somewhere and anywhere in between.

Talking about sex can be embarrassing for many women, but it's essential in checking out what is safe and comfortable, physically and emotionally.

Negotiating our sexual practices can be both empowering and downright sexy.

Talk with your partner(s) about what turns you on and off, and what your sexual boundaries are. Talk about the contents of this resource!

Consent



Consent Be clear about what you want, and how far you want to go with any activity and value yourself enough to stick to that. The only way to know for sure if someone has given consent is if they tell you. Check out what your sexual partner wants. Be aware of her body language. Include checking if she is comfortable as part of your sex talk - a whispered “Is this ok?” or “Do you want to go further?” – can be very sexy. Stop if she says it’s not ok.

Coercion is never ok. Everyone has the right to say “No,” or to change their minds at any stage even if they have always said “Yes” previously. Sex without consent is rape. Sex with someone who is too out of it on drugs or alcohol to consent is rape. NZ law now recognises that women can rape or sexually violate other women.

Safer Sex

The risk of transmission of sexually transmissible infections (STIs), including HIV, between women is lower than male-to-female and male-to-male. Risks do exist.

Studies have found Herpes and HPV (genital wart virus) in women who have **never** had sex with men.

You cannot judge that someone is free of STIs because they look healthy. Many STIs have no signs or symptoms. The only way of detecting these is an STI test.

There are some things you can do to make your sex safer and to ensure that you care for your own and your partner's health and well being.

The basic principle is no exchange of body fluids. Keep your partner's bodily fluids out of your body! That includes vaginal secretions, blood, discharges from sores caused by STIs, and breast milk.

It is important to assess our risks and consider ways of minimising the likelihood of infection transmission. Communication and honesty are important between partners.

Remember: in order to transmit an STI someone first has to have one.



Oral Sex

Oral sex, or cunnilingus, means licking, kissing, sucking or tonguing the clitoris, labia and vagina. It is pleasurable for most women.

If a woman has open sores and cuts in her mouth she may be at risk of getting STIs through oral sex. The risk of transmission is greater for person performing oral sex i.e. the person doing the kissing/ licking/ sucking.

If your partner has a vaginal infection or her period and you agree to have oral sex use a latex dam or cut open a condom lengthways to cover her genital area. Use lube with it.

Penetration

Putting large things inside you such as fists and toys can cause tearing, making you more susceptible to the transmission of bacteria and viruses.

Finger /Vaginal Penetration / Fisting

Fingering involves using fingers and sometimes hands to stroke the vulva and penetrate and move around in the vagina.

Fisting involves penetrating a woman's vagina or anus with a whole hand. If engaging in this activity it is essential that you start slowly and with a few fingers and build up. Slow and gentle withdrawal is equally important.

Keeping fingernails trimmed, removing rings and bracelets and using lube will help prevent soreness, tearing or bruising the vagina and will therefore minimise opportunities for infections to move into the blood stream. Bacteria can accumulate under fingernails and possibly lead to vaginal infections.

Latex gloves are useful in protecting against STIs and can also make penetration smoother and more enjoyable.

If you are not using latex gloves wash your hands thoroughly in warm, soapy water before and after fingering or fisting your partner.

Using Sex toys

When choosing toys be realistic about the size! Let the woman on the receiving end control the action to avoid abrasions.



Sharing sex toys can be an STI risk as more infections can survive in the fluids in the cervix, at the top of the vagina.

Dildos can be used for vaginal or anal penetration. Some women have strong views against their use for political and personal reasons.

They come in all shapes, sizes, colours, textures and materials. Silicone dildos are easier to clean and transmit heat so, with the right size, are generally comfortable.

Plastic and glass dildos are more rigid and may be more likely to cause damage. Silicone is itself more likely to be damaged than plastic and could present a risk.

If your dildo has any breaks on its surface, always use a condom with it; those breaks will make it difficult to keep the dildo clean. Use condoms where sharing dildos with other women to avoid sharing vaginal infections.

Using Sex toys

Butt plugs are designed to be inserted in the **anus** and **rectum** [arse]. They tend to be shorter than a dildo, and have a flared end to prevent the device from being lost inside the rectum. Condoms don't fit butt plugs well so pull the condom over the entire butt plug to keep it secure.

An item that has been used anally should not be used vaginally. Use a condom for anal sex then a new condom for vaginal sex to avoid infection. It is safer to have different toys for different uses.

After every use, wash the dildo or butt plug thoroughly with warm, soapy water.

By using condoms and lube, changing condoms between partners, and washing toys carefully you can eliminate risk.

Using Sex toys

Using Sex toys

Vibrators are used most often on the exterior of a woman's genitals for sexual stimulation.

Vibrators are often quite helpful for women who can't reach orgasm during masturbation or sex. For women with decreased mobility, vibrators can be wonderful. For women experiencing reduced sensitivity as they age a vibrator can provide pleasure more easily.

Vibrators can simply be a fun addition to some women's sex play.

Do not use vibrators on a skin rash, or existing swelling or bruises.

Use a condom. Do not share between partners. Wash in warm, soapy water after removing the batteries.



Anal sex

This can involve rimming (licking, tonguing and delving around and inside the anus) and penetration.

Bacteria live in the anus so use latex dams or cut up flavoured condoms lengthways. Put lube on the anus side of the dam or condom to remove sensations of latex friction for the receiving partner.

Prepare for anal penetration by relaxing e.g. with a bath or massage. Arouse the surface of the anus first, penetrate slowly and start with something small. The rectum has no natural lubricants and lacks the elasticity of the vagina so is more susceptible to tearing than the vagina. Use plenty of lube and go gently with toys and fingers/fists. There's no "end" to your rectum and things really can get lost up there, so be careful. And if it hurts, stop.

Clean your sex toys with disinfectant soap after anal play, even if you use a condom

Frottage/ Tribadism



This involves the rubbing or grinding of a vulva against some part of a partner's body.

If two women are flexible or around the same body size it may be possible to have direct labia-to-labia and clitoris-to-clitoris contact. There is an STI transmission risk if there is contact and exchange of fluids.

Use a latex dam to create a barrier between partners.

Watersports

Urinating onto a partner carries a very small risk of bacterial infection for the partner.

Sex with Men

Women have sex with men for pleasure and fun, for romantic and emotional reasons, to get pregnant, to make a living, or because they are coerced or abused. Many lesbian and gay identified women fantasise about having sex with men, while some have occasional sex with men.

Regardless of your sexual identity practising safer sex with male partners is important. Safer vaginal and anal sex with men generally means using condoms with water-based lube.

If you have unplanned, unprotected vaginal or anal sex with a male partner get an STI check two - three weeks later.

If you want to avoid pregnancy after unprotected sex, and you are not post menopausal, the Emergency Contraceptive Pill (frequently referred to as “the morning after pill”) can be taken for up to 72 hours after intercourse. It is most effective if taken within 24 hours of sex. It is available from Family Planning, on prescription from GPs, or can be purchased over the counter from pharmacies.

The female partner is at greater risk of getting an infection than the male partner as the vagina and rectum are more absorbent than the penis.

If you are in a relationship with a man both of you should be tested for STIs before you decide whether or not to stop using condoms.

Substance Use & Abuse

Using alcohol and drugs is a significant part of some of our lives. Substance use can lead us to take sexual, physical and emotional risks we might not otherwise take.

Alcohol and drugs can impact considerably on our emotional health.

If you are using injectable drugs don't share works. You run the risk of HIV, Hepatitis B and C. Have a supply of clean equipment handy. Get in touch with your local needle exchange for information and equipment (<http://www.needle.co.nz>, or look under Needle Exchange in your local phonebook, or call the national office on 03 366 9403).

Substance Use & Abuse

Piercing, cutting and tattooing are risky from a blood borne virus point of view (e.g. HIV, Hepatitis B & C) if unclean equipment is used.

The basic safety precaution is sterilising equipment (use bleach at home) and preventing another person's body fluids from entering into your bloodstream. Wear gloves if you are piercing, cutting or tattooing your partner and do not get blood into your mouth if you have cuts or sores in your mouth.

If you are **shaving**, use separate razors.

Wax – if you are dripping wax candles on your partner make sure they are made of paraffin wax (your average household candle). Beeswax candles, while smelling gorgeous to many, melt at a high temperature and can cause permanent damage.

STI Risks

Infection	What is it?	Transmission Risk	Prevention	Treatment
Chlamydia	Infection of the lining of the cervix or urethra	Sharing toys between partners without use of condoms or cleaning the toys	Use condoms on sex toys	Antibiotics
Crabs and lice	Small lice that live in the pubic hair. These cause inflammation and irritation	Through close body contact, usually during sex with an infected person. Lice can be spread through infected, shared bedding and clothing	Difficult to prevent, but maintain high levels of cleanliness	Non prescription lotion or specialised shampoo
Gonorrhoea	Bacterial infection of genitals, throat, rectum	Low risk - via shared sex toys without condoms or cleaning between partners	Use condoms on sex toys	Antibiotics
HIV	Virus which attacks the white blood cells and damages the immune system causing difficulty in fighting infection	Requires a route into the blood stream. Via shared toys where blood is present	Use condoms on sex toys. Use latex gloves and dams if having sex involving blood and you have broken skin	The disease can be controlled by antiretroviral medication. Treatments are available for the secondary infections and some cancers
Hepatitis A	Virus that affects the liver	Can be spread through sex which involves oral to anal contact (rimming)	Use latex dams or cut up condoms when rimming	Immunisation available, no medicated treatment
Hepatitis B	Virus that affects the liver	Easily transmitted via shared sex toys, oral sex and possibly rimming, sharing needles and razors	Use latex dams or cut up condoms for oral sex and rimming. Do not share needles and razors	Most people are able to deal with it naturally within their bodies. Immunisation is available

STI Risks

Infection	What is it?	Transmission Risk	Prevention	Treatment
Hepatitis C	Virus that affects the liver	Route into blood stream, easily transmitted via intravenous needles	Don't share works	Antiviral treatment
Human Papilloma Virus (HPV)	Wart virus which can lead to cervical cancer or genital warts - different wart strain from those found on the rest of the skin	Genital to genital contact. (Unlikely that warts on hands can be transmitted to genitals)	Avoid genital to genital contact. Regular smears to detect any pre-cancer	Warts can be treated by creams, or by freezing or burning
Genital Herpes	Herpes simplex is a virus that causes infection, usually on the mouth and lips(cold sore) or on the genitals	Close skin contact with someone who has the virus. Oral sex e.g. if partner has a cold sore. Via shared sex toys, without condoms or cleaning, between partners	Use latex dams for oral sex when cold sores present	Sores can heal on their own. Antiviral medication can reduce pain and severity The virus remains in the system
Syphilis	An infection of the skin or lining of the genital area. It is a bacterial infection	Close skin contact	Reduce risks by using condoms on toys	Antibiotics
Trichomoniasis	Small parasitic organism causing irritation of the vagina	Sharing toys between partners without use of condoms or cleaning the toys. Touching own genitals then partner's	Use condoms on sex toys. Clean fingers in hot, soapy water before touching self or partner. Keep fingernails short. Use latex gloves and lube	Antibiotics

Other STI Risks

Infection	What is it?	Transmission Risk	Prevention	Treatment
Infections which affect the genital area but may not be related to sexual contact				
Bacterial vaginosis	Vaginal infection causing smelly discharge and discoloration	Sharing toys between partners without use of condoms or cleaning the toys. Touching own genitals then partner's	Use condoms on sex toys. Clean fingers in hot, soapy water before touching self or partner. Keep fingernails short. Use latex gloves and lube	Antibiotics
Thrush (Candida)	Vaginal infection causing itchiness and irritation	Sharing toys between partners without use of condoms or cleaning the toys Touching own genitals then partner's Use condoms on sex toys	Clean fingers in hot, soapy water before touching self or partner Keep fingernails short Use latex gloves and lube	Cream or prescription/over the counter
Cystitis	Bacteria in bladder and urethra causing burning when urinating, frequent urination, aching in lower abdomen and back	Frequent sex. Wiping from back to front after using toilet. Common in all women regardless of sexuality	Use lubricant for sex. Urinate ASAP after vaginal sex. Clean fingers and toys if moving between anus and vagina. Wipe front to back after toileting. Keep fingernails short. Use latex gloves	Antibiotics

Safer Sex devices

Condoms

Condoms come in all sorts of widths, lengths, colours, flavours and textures, extra lubricated or not. The issue is whether the condom is large or small enough for your toys so it won't come off during sex.

The golden rule is use them only once.

You can buy condoms from supermarkets, pharmacies, or online, or get a prescription for up to 144 for \$3.00 from Family Planning clinics or a GP.

Use condoms with water-based lube to reduce the friction and therefore reduce risks of the condom tearing.

If you are allergic to latex it is possible to buy non latex condoms.

Safer Sex devices

Lubricants

Lubricants can enhance penetrative sex and reduce the risk of cystitis.

Lube can be used for clitoral stimulation, as well as vaginal and anal penetration. Lube reduces the potential for soreness and reduces risks of abrasions and therefore opportunities for infections to move into the blood stream and skin.

If you are using toys and condoms lube reduces friction and the risk of condoms breaking. Use water based lube to avoid damaging the rubber.

Some lubes come in flavours, while others heat up on your skin. Taste test flavoured lube and always test a speciality lube by trying a bit on your inside forearm. It's best to find out if you are allergic to it or don't like the way it feels before putting in into your vagina or anus.



Safer Sex devices

Dams

Latex dams (“dental dams”) are sheets of latex. They act as a barrier between the vulva or anus, and the mouth. They are thin enough to transmit heat and sensation but provide an effective barrier against infections from vaginal or anal secretions. In place of a latex dam, you can use a condom cut open lengthways.

Ensure the dam is free of holes by holding it up to the light. Use some water-based lubricant on the vagina or anus beforehand to increase the amount of stimulation your partner receives. Hold the dam in place to ensure that it doesn’t slip. Use the dam only once. You can put non-oil based products on the dam – e.g. chocolate - if you want to add a little something to the action.

Gloves



Latex, or surgical gloves, can be used for fingering and fisting. They create a barrier to infections.

Used with lube they can be a fun and slinky addition to sex play.

Turn them inside out, knot them and put them in a bin after use.



Cyber Safety

Internet dating is increasingly popular.

Because of the relative speed and ease of meeting people, internet dating can accelerate the feelings of trust and the sense of being in a relationship. This can then exacerbate the feelings of disappointment, rejection, sadness and grief associated with a relationship going wrong.

Some ideas for safeguarding your heart. These apply to any relationships, not just internet generated ones:

- Be clear about what you really want and be honest about it with yourself and your partners. Do you want something casual or serious?
- Write a list of what you want, and what you definitely don't want and stick to it
- Acknowledge the positive qualities you bring to relationships. Honour yourself and expect others to behave honourably towards you
- Be cautious about giving out personal information until you know who you are dealing with
- Share your expectations with a close friend who cares about you, let them know where you are meeting your date and check in with them after each date
- Arrange to meet in public places until you are comfortable with the person
- Go at your own pace always.



Sexual Health Checks

Have a sexual health check up if you want reassurance that you don't have an infection, if you are changing sexual partners, if you have been having sex with men without protection (e.g. vaginal or anal sex without condoms), or if you notice any symptoms such as redness, itchiness, or changes in discharge colour, consistency or smell, blistering, sores, or ongoing pain while peeing.

You can get an STI check from your GP, Family Planning or free from Sexual Health Clinics – see your phonebook.

Cervical Smears & their relevance to you

Cervical smears are recommended every three years once you have become sexually active, and have reached 20 years of age. Even women who have never had sex with men need to have them regularly. Women who do not identify as straight do have cervical abnormalities as the Human Papilloma Virus (HPV) can be transmitted between women. Women who smoke are at greater risk from cervical cancer.

The smear is a simple procedure involving the insertion of a speculum and using a spatula to remove a few cells from the cervix. The purpose is to check the cervix for any signs of changes in the cells which could be pre-cancerous. Early detection is important for early treatment, although not all changes are an indicator of pre-cancer.

Virtually no women are comfortable having smears, or being examined, but there should be no reason for a smear to be painful. Let your health care provider know if you are feeling uncomfortable before, or during a smear.

A pelvic examination is sometimes conducted at the same time as your smear. It can help detect abnormalities such as fibroids (usually harmless growths in the wall of the uterus) and cysts. You may choose to have or to decline a pelvic examination.

Smears and pelvic exams are part of regular self-care.

If you have had a hysterectomy talk to your medical practitioner about whether or not you need smears – you may not need a smear if you have had your cervix removed and never had an abnormal smear result.

You may wish to choose Family Planning as your smear provider.

Breast Checks

Breast cancer develops in roughly one in ten women in NZ. It is more likely in older women, those who have not had children and those who have had breast cancer in the family. You are entitled to a free mammogram from the age of 45.

Get to know your breasts, and those of your lovers! Breasts are less lumpy directly after a period, and after menopause.

See a doctor as soon as practical if you detect a lump. 80 to 90% of lumps are not cancerous but early detection and treatment is best.

Breast Checks

Insemination & Conception

Preconception planning is a good idea. Stop smoking and drinking. Reduce caffeine intake. Avoid environmental chemicals including garden chemicals. Ensure you are exercising, and if you are overweight try to lose weight. Start taking folic acid, at 0.8 mg per day one month prior to planned conception, and then for 12 weeks into the pregnancy. Remember: the older a woman is the smaller her chances of conceiving.

Fertility clinics can assist with securing donors who will have been screened for conditions like HIV. Google “Fertility,” or check under “Fertility” in your local white pages.

If you are using a friend as a donor ensure he has had an HIV test three months prior to insemination and a full STI check two weeks prior to insemination, and has practised safer sex in between times – i.e. condoms and lube every time, no exceptions. Be sure you are aware of any potential donor’s medical history and possible other risk factors, such as drug use.

You will also need to consider legal arrangements such as access and guardianship.

Parenting/step - & co- parenting

Many women parent children. There are a number of studies that demonstrate that lesbian and gay people are at least as good at parenting as heterosexuals. Children raised by lesbian or gay parents are at no increased risk of gender identity confusion or any identifiable emotional or behavioural pathology.

Where children come from previous relationships the extent to which a partner should be involved in parenting needs to be decided by the individual couple.

Experts recommend telling the children about your sexuality, being open and honest, and counteracting negative opinions they will otherwise hear through positive parenting.

It is especially important to find healthcare providers that you can be open about your sexuality with when in a parenting situation.

PMS

Pre menstrual Syndrome (sometimes called PMT) symptoms can be physical, and emotional or behavioural. The most common symptoms are:

- Dysphoria – depression, anxiety, irritability, anger, inability to concentrate, nervousness
- Breast tenderness
- Fluid retention
- Headache
- Fatigue or exhaustion
- Food cravings – especially for chocolate, sugar or salt

Some women use herbal remedies, such as evening primrose oil, magnesium and Vitamin E although there is little scientific evidence to support claims that they improve symptoms.

However, calcium (1200mg daily), has been shown to have benefits in trials.

Other approaches women can take are:

- Regular aerobic exercise – 30 minutes, 3 - 4 times a week, especially when premenstrual
- Learning relaxation techniques
- Regular meals, high in complex carbohydrates, moderate in protein and low in refined sugars and salt
- Minimise alcohol, tobacco, and caffeine.

Menopause

Menopause is a natural process that occurs in all women, usually at around 45 -55 years of age. There is generally a transitional phase lasting several years, characterised by increasing irregularity in the frequency and length of periods. During menopause a woman's oestrogen levels fall and menstruation eventually stops.

The main symptoms are hot flushes and night sweats. This can disrupt sleep, causing irritability and tiredness both for the menopausal woman and her partner. There is reduced elasticity in the vagina and many women experience vaginal dryness which can make sex painful. Some women have no symptoms at all.

Bones get thinner during the aging process, and the drop in oestrogen at menopause can cause loss of bone strength.

Depression, anxiety, forgetfulness and loss of interest in sex are often blamed on menopause, but there is no evidence that these are because of menopause. Some women report an increased sex drive.

HRT (hormone replacement therapy) decreases or stops hot flushes. A large scale, 8 year, US study was terminated half way through in 2004 when combined HRT was found to be associated with increased risks of invasive breast cancer, heart disease, stroke and blood clots. Benefits were a reduction in the risk of hip fractures and colorectal cancer.

Menopause

The Ministry of Health advises women who want to use HRT because of troublesome hot flushes and night sweats to do so at the lowest dose for the shortest period of time possible.

If you are experiencing menopause the following suggestions may help you:

- Vaginal oestrogen cream, available on prescription, is safe in low doses. It increases vaginal moisture. Replens, a non hormonal vaginal moisturiser, is also available in some pharmacies
- Talk to your partner about how you feel physically and emotionally, especially if you have a much younger partner who may not be experiencing the same physical changes
- Use lots of lube when having penetrative vaginal sex, or if that is painful focus on non penetrative sex and other ways to pleasure and be intimate
- Get separate duvets to minimise the disruption to sleep
- There is some clinical evidence to show that the herbal remedy Black Cohosh may reduce hot flushes and night sweats. It takes several months to become effective, is expensive and there is little data on its long term safety
- Exercise regularly, reduce stress, eat well, stop smoking and drink alcohol in moderation
- Natural progesterone cream, available on prescription may help with hot flushes, although there is little clinical evidence to support this, and little data on its safety.

Accessing health practitioners

It is important to feel comfortable with your healthcare provider. You may want to find a gay or lesbian doctor, or determine that a doctor is comfortable with your sexuality.

Read the ads in gay papers. Ask your friends who their clinicians or therapists/counsellors are and if they are comfortable with them, and happy about the care they receive. Call your local gay and lesbian switchboard to see if they have lists of clinicians and therapists/counsellors.

To receive the best health care possible it's wise to come out to your clinician. The more they know about you the better s/he should be able to help you and you can avoid unnecessary questions.

Coming out can be nerve wracking. However, when completing the practice registration form it can be as quick as explaining that you don't use contraception because you are not sexually active with men, or are in a relationship with a woman, if you are of pre-menopausal age.

Remember: you deserve the best care you can get and most primary care doctors have seen just about everything.

You may decide to see a GP for your general health needs and access a specialised service like Family Planning for your sexual health care.

Emotional Health & Resiliency



We all deserve to be healthy. To become and stay healthy we can look after our physical health and our emotional and spiritual health.

We need to develop coping skills and mechanisms to get us through the hard times.

This includes figuring out what might be stressing us and learning strategies and ways to deal with this, and finding our personal strengths, key people and activities that make us feel good about ourselves.

Some strategies may be:

- Building in time to relax
- Taking up meditation or yoga
- Eating well
- Exercising
- Having massages
- Building in treats and things that you enjoy
- Changing your attitude or approach to things
- Changing your circumstances – the radical route e.g. changing job, ending an unhealthy relationship.

Resiliency helps us to spring back, and recover from shocks and knocks. It's important to face reality, and build bridges from present challenges to a fuller, better constructed future. Develop connections and attachments to family, friends, and community groups. It's important to have something to do, some sort of purpose and something you can achieve with. Join a group, volunteer, get involved with your queer or civic community.

Feeling sad, worried, anxious or experiencing grief and distress are normal responses to life events. If they become overwhelming it's important to seek help.



Dealing with partners' mental & emotional health issues

Given women's propensity to merge it is useful to develop mechanisms for separating yourself from your partner's emotional issues in order not to "take them on."

Try not to take things personally or blame your partner.

If your partner has a specific condition it is helpful to learn what you can about the condition, how it's treated and how you can best support them.

Encourage your partner to stick to any treatment regimens they may be on, and make it easy for them to avoid alcohol, and drugs.

Try to build in fun ways to keep stress levels down.

Dealing with homophobia

Homophobia is negative feelings and illogical fear or hatred of homosexuals.

Many same sex attracted people live with some level of internalised homophobia. This negative feeling about ourselves and others like us can impact on health, happiness and sexual fulfilment.

Many bisexual women experience bi-phobia from both the straight and lesbian communities. However, as concepts around sexual identity, culture and behaviour have lost some of their rigidity in the last 20 years this is hopefully reducing.

Human rights are protected under the law in NZ, and we can not be discriminated against in employment, education, housing and service provision on the basis of our sexuality. If you feel you have been discriminated against you can ask the Human Rights Commission for assistance (<http://www.hrc.co.nz>).

Removing internal homophobia and building resistance to homophobia takes time.

- Connect with other same sex attracted people, whether in the flesh or online
- Build a network of supportive friends, including straight friends
- Develop skills and interests that bring you joy and positive feedback
- Read books with queer characters, sign up for the Out Takes film festival mailing list, and watch The L Word again!

Relationship abuse

Violence and abuse occurs within same sex relationships, although it is not often talked about. Women can be perpetrators of abuse. It's not about how big or strong someone is – it's about misuse of power and control.

What is Relationship Abuse?

- It can include emotional abuse such as: name calling, threatening, humiliating, blaming, insults, put-downs, isolating from friends/family, ridiculing, intimidating, cold shoulder, controlling and constantly checking up on where you are and who you are with, pressuring, extreme jealousy, destroying property, injuring pets
- Physical abuse such as: putting a person in danger, pushing, slapping, hitting, punching, kicking, hair pulling, choking, burning, using a weapon or other objects to harm
- Sexual abuse such as: pressuring someone into having sex (this could include touching, kissing, fondling, oral sex or penetrative sex), being forced to pose for sexual pictures or look at pornography
- Economic abuse such as: controlling joint finances, withholding money, making all the financial decisions

If any of these things is happening to you on a frequent basis, you may be in an abusive relationship.

Relationship abuse

Relationship abuse is not a one-off event. It's a cycle and usually gets worse if nothing is done to stop it. It's not your fault – abusers are responsible for their behaviour. If you are in an abusive relationship, the best thing for you to do is end it. This may be tough and you may need help:

- 1.** Find support from people who care about you and tell them what is happening
- 2.** Contact your nearest stopping violence service on 0800 4SVSSVS or women's refuge, under "w" in the phonebook
- 3.** Go out in groups (not alone) for a while
- 4.** Carry a mobile phone or phone card and phone numbers of support people
- 5.** Carry money
- 6.** Arrange your own transport
- 7.** If necessary get a trespass order from the Police (to keep the abuser away from home, work or school).

If you are doing any of these things on a frequent basis, you need help.

If you want to change your behaviour with help you can. To talk to someone from your nearest stopping violence service, phone 0800 4SVSSVS (0800 478778). Nothing is so bad you can't talk about it.

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