Out Late
A guide for older men coming out
This booklet provides information about sexual identity and coming out as an older gay man as well as important information about health and safe sex. It is not a ‘how to’ guide, nor does it cover every detail that is likely to affect men who are considering coming out as gay. It does, however, explore a range of topics that many men in this situation have experienced. Some of the language is explicit.

In the back there is a directory to other services that may help you, together with a glossary that explains the terms printed in coloured ink in the text. Some of these are gay community terminology and others are medical.

AFAO would like to acknowledge that any model or person featured in this educational publication in no way depicts or implies their mental or physical health or social issues, substance abuse, criminal activity or sexual activity or preferences.
Coming out – what’s involved?

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You’re not alone

Thousands of men in Australia have had to come to terms with the discovery that they are attracted to other men. For you it may be a new discovery or something you have known for years but felt uncomfortable about openly acknowledging. It can happen at any age and at any life stage, but the older you are and the longer you have been living a straight life, the more challenging it is to come out as a gay man. It is not a simple process and you will almost certainly experience some difficulties, but there are many sources of advice and support that you can utilise.

Coming out to yourself

Long before you come out to anyone else, there’s an important first step. Coming out to yourself involves moving beyond denial and acknowledging to yourself that you’re attracted to other men. You may have heard a lot of negative things about gay men and carried these messages around inside you. Negative messages and actions against same-sex-attracted people are called homophobia. Carrying these messages around inside can make you feel bad and depressed. This is called internalised homophobia. Sometimes the choice that you make to explore your sexuality can feel all too hard; you might wish that you’d never had these feelings for other men. You’re not the only one to have felt this way. For most men who acknowledge these sexual attractions later in life, whether in their twenties or their sixties, going through this emotional journey is challenging.

Most people who are same-sex-attracted and have come out say that not only do these feelings pass but that having come out makes them feel better. It can feel like a tough process to go through, but often the positives make it more than worth it.

Denial

Many gay men say that long before they admitted to themselves that they were gay, they had experienced some degree of attraction towards other men. Sometimes these feelings were obvious, other times less so. There are many reasons why you might have chosen not to explore your attraction to men at an earlier age. Everything from family through to religion can play a part in this choice. Some men felt they had no choice at all. Hiding from others — and even from yourself — that part of you that is attracted to other men is often called denial. Separating out these feelings from the rest of your life and burying them might seem like a way of dealing with them. Sometimes, it’s a way of not dealing with them. Holding such feelings inside, or denying them, can sometimes affect your health quite badly.

When you finally decide to act upon these feelings, it might also feel difficult. It can feel as though you’re complicating your life. Living in denial might have seemed simple compared to this. Most men who have chosen to act on their attraction to other men will tell you that they don’t regret it for a moment. Many feel that they can, at last, be the person they really are. The choice is always there. This guide simply offers some help along the way.

It’s a process. Give it time

Coming out as a young man who is attracted to other men presents a number of issues; coming out when you are older and have previously lived a heterosexual life raises additional concerns. Your family and community will have
a certain view of who you are and you will probably be concerned about being treated differently and perhaps not in the way you wish to be treated.

Deciding to be open about your attractions is a process, and you will find some people’s reactions better than others. There’s no easy way of getting others to be comfortable with the idea that you might be gay. Give it time. You’ve taken the first and most important step already by acknowledging to yourself that you are attracted to other men.

Now is the time for other decisions to be made. Consider your options. Weigh up what you think appeals to you, and what you feel might work for you.

Working out what being gay means for you

Being gay means different things to different people. It is more than the sex you have. It’s also the attractions you feel, the love you desire, and for some gay men, it’s a way of seeing the world. Even if you don’t have sex with other men, you can still be gay. Working out just what being gay means for you might take time and thought.

There is no one type of gay man, or any one way for gay men to behave. There are simply ways of being. And there are as many types of gay men as there are types of men in general, if types are important or useful.

You might feel more gay in some situations than in others. You might feel more like a gay man when you’re at a family celebration, for example, because you feel you’re the only one. Or you might feel more gay when you’re watching a pride march or at a gay venue, among other gay men. The important thing to remember is that no one can tell you how to be gay. You can make of it what you want.

Second thoughts and making mistakes

You may find yourself having second thoughts, wondering if this is the right thing to do. On the other hand you might feel that you are taking control of your life at last. You may
find it helpful if you write down what you’re feeling or find a friend or counsellor who you can talk to about it (see ‘Who can help?’). This can help you to remind yourself why you decided that this course of action was the right thing for you.

It can be frustrating if the life change you are seeking doesn’t happen instantly. You may feel angry about mistakes you make, or have regrets along the way. As with anything new that you try in life it’s probably best to be gentle with yourself. Accept that it’s OK for you to make mistakes and to learn from them. You are your best support!

Is this worth doing at my age?

Whether you’re in your 20s or your 60s, you may regret having left it this long before acknowledging your feelings of being attracted to other men. You may feel you’ve wasted years of your life, or that other gay men will always be more experienced than you, or that they understand the ‘gay world’ better than you could ever hope to.

You might also feel that you have responsibilities in your life that other gay men don’t have. Changing your life may well affect the lives of others around you. But others may also have responsibilities that you aren’t aware of.

What you have, whether you’re 26 or 62, is the rest of your life to live and enjoy!

How do I fit in?
Will I fit in?

The gay community is full of different people with different ways of living. To find out where you fit in, you may find it helpful to join a gay social or community group, go to gay venues (e.g. pubs and clubs) or go on a pride march. Or you may choose not to do these things. Finding out where you feel comfortable is entirely up to you.

Making decisions about changes

Making sudden changes doesn’t work for everyone. What if you decide to move house to start your new ‘gay’ life, and find you prefer your old house? What if you decide to get yourself a new set of gay friends, and then miss your old friends?

Discovering what works for you can take time but once you know what sort of lifestyle you want, decision-making will be easier.

It’s important to trust yourself and your feelings. Talk with other men who have gone through the same thing. Have a look at how other gay men live their lives, at what they do with their time and how they fit into the gay community. If they have come out at a later stage, try to find out what decisions they made with regard to changing their lives.
What about the ‘old’ me?

Coming out as someone attracted to men does not mean that your old life was wrong or fake, or that the ‘old you’ requires changing. However, you may want to make changes, to overhaul your life completely. Whatever choices you make, people who love and respect you should love and respect you both as the person you are now becoming, and as the person you have always been.

Coming out and HIV

Coming out as a gay man is different now from how it was 25 years ago when no one knew about HIV. It is important for all men who have, or would like to have, sex with men — whether they are just coming out, or have been out for years — to be educated about HIV. We can all play a role in preventing HIV being passed on, and minimising the effect of HIV on our lives (see ‘Sex and gay men’ and ‘Health risks and sex – looking after yourself’).

Expecting too much – of yourself and others

The gay scene and gay life can be exciting — new friends, a community of like-minded people, sexual partners — it can be wild and mind-blowing. But it’s important for you to work out what you want from the gay scene and to be aware of all the options that are available to you, to look beyond the stereotypes and the stereotypical gay life.

If you’re new to the gay scene, you may find that your expectations of what it can offer are too high. At the same time, your estimation of what you can offer may also be too high. Many gay men find that when they first come out there is a rush to embrace the gay scene and the gay lifestyle. This period may last months, or even years. You may feel as though you’re a teenager again, just setting out on a new sex life. Be aware that others may look at you and not see a teenager; it might be worth considering your age in some ways.

Over time, most gay men develop a sense of what is right for them — and this includes how involved they want to be with the gay scene — and live their lives accordingly.

Telling others

What is the best way to tell other people, including family and friends, that you are attracted to men, that you might be gay? This is never easy. Searching for the right time and place to tell them can be almost as hard as actually telling them. How and when and why will vary from man to man, and will be different with each person told.

Other people’s reactions

Some people will be surprised or shocked when you come out to them. Some people will not be surprised at all. Some people will have been waiting or expecting you to tell them, so their reaction might be ‘What took you so long?’.

Some people will initially react with surprise, but on looking back, will not be surprised after all. It might make sense of your life and experiences for them. The reactions of some people will probably be hurtful and upsetting for you. Remember, you have had longer to get used to this idea than they have, so it might come as a shock to them. Once they get used to the idea they may even regret the first thing
they said to you. It’s always important to discuss these issues, and to make your own point and feelings heard. Nonetheless, some people will never accept you as the person you really are.

You may have many people in your life – family, friends, partners and even children – who know you as a heterosexual. For some of them, learning about this other side of you can come as a shock. They may feel that because they didn't know that important factor in your life, they don't really know you at all.

It’s important you reassure these people that not only are you the same person you’ve always been, but that this ‘new’ self was always inside you. You haven’t changed much at all, you’ve just allowed another part of you to come to the surface. It might also be important for you to let these people know that you still love them and need their support during this important transition stage in your life. Some friends may not be able to handle this change, but others may surprise you with their support.

Coping with change

You may decide that coming out requires changes in other ways. But keep in mind that a huge change such as this, even when made in small steps, can leave you with a lot of emotional turmoil. You might feel upset about letting go of the life that you had or giving up on what you hoped for in your life. At a time of great change like this, it’s important not to make too many other major changes. Try to avoid big decisions like quitting your job or selling your house until your feelings have settled down a bit.

On the other hand, some smaller changes might be OK. You might, for example, feel you need to change to a doctor with whom you feel more comfortable when talking about your same-sex attraction and sex life.

“It’s important to trust yourself and your feelings. Talk with other men who have gone through the same thing.”
What it’s like to be gay in our society

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Visibility

Fifty years ago, open recognition of gayness in films or television was very rare. These days we have shows like *Queer as Folk* and *Will and Grace* on television and people like George Michael and Ian Roberts coming out. This growing openness about being gay, particularly by gay men who are well known, has led to far greater acceptance of gayness by the general community.

Gay men have diverse lifestyles

There are gay men throughout our society, in all age ranges, professions and cultural groups. Some have been married or had relationships with women and may have children. Some have male partners, others don’t. Some gay men are very involved with the gay community while others are not. Like all people, men who are attracted to other men are not all alike, nor do they all have the same lifestyle. It’s up to you to decide how you want to live as a gay man.

Stereotypes

Despite the growing acceptance of gay men, there are still too many negative images of them. Gay men are still often portrayed as being selfish and shallow people who only look out for their own needs. Too often they are seen as muscle boys and drag queens who go to endless parties, drink and drug themselves into oblivion and participate in casual and meaningless sex.

This makes it difficult, not only for your friends and family but also for you, to see how gay men’s lives really are – to see the true diversity of gay life. The day-to-day lives of gay men are just as ordinary and just as exciting as everyone else’s lives.

Just like straight people, gay men (and lesbians too) plan for a future, pay taxes, have families and represent their country in sport and in all other areas of personal endeavour, just as they have always done throughout history.

You might be surprised at the number of famous men who were attracted to other men. Among them you’ll find such men as Leonardo da Vinci, Shakespeare and Alexander the Great. Ideas of gay community should not start and stop with gay bars and saunas. This limits the richness of gay men’s contributions to culture, history and community. The missing ingredient in stereotypes of gay men is their diversity.

Gay men and their cultural and religious backgrounds

Gay men come from many different cultural and religious backgrounds. Sometimes these differing values can make it even more difficult for a man to come out and be open about his sex life. Living as a gay man will not mean that these cultural and religious differences are suddenly irrelevant or not a part of you any more.

Some gay men lead a life that is similar to their life before coming out, continuing their religious rituals and cultural observances. Others come to an agreement with themselves about what they will, and won’t, observe or practise. Some completely reject their previous religious or cultural lives and welcome the change, and some seek other men who share the same cultural and religious background and choose them as partners and friends.
You will need to decide what changes will and won’t happen. It’s a challenge, and one that all men who are attracted to other men, from all religious and cultural backgrounds, have to think about.

**Becoming involved in the gay community**

There are a variety of ways in which you can use or access gay community activities, services or organisations. Some choose to spend most of their time in the gay scene for most of their lives, while others may only dabble in it on occasion. Some choose not to become involved at all. The decision is entirely up to you. Some gay men find that they don’t want to live their lives separated from the *heterosexual* community. Different people require different levels of community involvement or support, regardless of which community it may be.

However, not being into the gay scene does not mean having to stay away from it altogether. Many people who might classify themselves as ‘*non-scene*’ contribute to the gay scene and use the services, opportunities and experiences it provides, as the need arises. And remember, membership of gay organisations or the number of times you visit a gay bar in a week is not a measure of your ‘gayness’.

**Living away from the city**

If you live away from the city you may find coming out and living as a gay man more challenging. Small towns and communities can make prejudice and discrimination harder to deal with. Remember, you are not alone. You may be able to make connections with gay men living in your own area, or with other men living in adjacent areas or towns, perhaps through the Internet. However, if you are looking for a partner there may be few single gay men available, and you may choose to make regular trips to larger towns and cities for sex or socialising. Be aware, though, that when you go on a break into an unfamiliar environment, community or culture, it is sometimes easier to take risks that you wouldn’t ordinarily take. For some men there are times when it feels such a relief to let go of their usual responsibilities that they go too far in the other direction and abandon caution in relation to personal and sexual safety.

Whatever the connection you make with others, in the city or in the country, when sex is involved it is always important to know about the risks of HIV transmission (see ‘Health risks and sex – looking after yourself’)

**Heterosexual relationships**

Being gay does not mean you cannot form friendships with women – and that includes *lesbians*. If you’ve previously been involved in heterosexual relationships with women, this may be difficult at first. Every situation is different. You may, during your time of coming to grips with your sexuality, have sex with women. This might well happen with your ex-lover or ex-wife, perhaps because it’s what you know and are comfortable with or because you miss being close to them. Some gay men have sex with women sometimes, just as some lesbians have sex with men sometimes.
Same-sex relationships

Contrary to what you might have heard, there are plenty of successful, happy long-term gay male relationships. Because we live in a world that is mostly heterosexual, we don’t see many gay male relationship role models. Many gay men, once they meet a partner, stop going out on the gay scene, so you don’t see many gay male couples at venues either. What we often hear instead is that gay men sleep around and that gay relationships never last. The reality is that there are many different types of gay male relationships, many of which last for many years.

It’s quite common for men attracted to other men leaving a marriage to look for a relationship with another man that will function just like the marriage they left behind. It can feel as though a lot has changed in your life and that you’d like some things to feel normal, like having a normal relationship — even if it’s with a man instead of a woman. While you might be looking for a relationship, remember that things aren’t that different between the gay and the straight world. Nobody wants to be rushed. A first date can be very casual and a lot of men can be frightened off if you seem as though you’re planning to be with them forever!

Because gay men don’t have marriage certificates and all the usual protocols to prove that their relationships exist, they have to make it up as they go along. This means that there are many different sorts of relationships that gay men can enjoy.

All relationships, including male-only partnerships, work best when there’s open communication. In a same-sex relationship there are a lot of choices to make about the kind of relationship that you want to have. It’s important that you and your partner talk to each other about what you want so that you can be sure that you are both getting your needs met.

Monogamous relationships

Monogamy — two people having sex exclusively with each other — is a common type of relationship that men have with each other; though less common than among heterosexuals. Some men decide from the moment they want to be with other men that they only want to have monogamous relationships, while others decide to have a monogamous relationship after years of casual sex. ‘Serial monogamy’ is when you have a series of partners, each of whom you are faithful to sexually while the relationship lasts. When the relationship ends, you find another partner to be monogamous with.

Communication with your partner is very important. Having topics that are off limits for discussion can mean that misunderstandings occur and agreements are broken. Having a relationship where one partner feels that he can’t even discuss being attracted to people outside the relationship through fear of a break-up could lead him not to tell his partner, which could cause enormous stress.

Being in a one-on-one relationship takes work. This is another person’s intimate feelings and trust that you’re involved with, and although he is a man too, he won’t automatically want the same things you want.

Some gay men in an exclusive relationship both get tested for HIV and, if they both test HIV-negative, choose to have sex together without condoms. You can read more about this in the section ‘Using condoms in long-term relationships’. If you are in a relationship and experiencing difficulties, you can find a range of counselling services that will cater to your needs. Just check out the directory at the back of this booklet.
Open and honest communication will allow you to learn about and respect each other’s differences and needs. Men are fully capable of loving each other and enjoying happiness in a long-term relationship.

Open relationships

An open relationship is one where there is an agreement that one or both of the partners may have sex with other men. Sometimes relationships become open because one of the partners needs more sex than the other; sometimes it’s just because while both partners love and care for each other, they also enjoy sex with other men. If you want to be in an open relationship, it’s important to talk about this with your partner. If he agrees, you will both need to be clear about what this means and what might happen.

These open relationship agreements can take different forms, depending on what the couple in the relationship agree to. For example, partners in an open relationship might agree that:

- they can have sex with others, as long as the other partner never gets to hear about it
- they can have sex with others as long as they tell each other everything
- they can have sex with others as long as it’s always with strangers
- they can have sex with strangers as long as they never have sex with the same person twice
- they can have sex with others as long as it’s the same person or people
- they can have sex with others, as long as they’re together
- they can have sex with others but they must always let the new people know that they have a partner
- they can have sex with others, but only when they’re interstate or overseas.

There are many different arrangements, which is why it is important to talk about your needs with your partner and for you both to be honest with each other. It can also be useful to talk again and to revise the agreement as time goes on. It’s important to agree always to have safe sex with others. See the section on ‘Health risks and sex – looking after yourself’ for more information on safe sex.

Some couples decide later to stop being in an open relationship. Others say that the reason their relationship has lasted for so many years is that it is open.

Other types of relationships

There are many other kinds of relationships that gay men have with each other. For example, men can be fuck buddies who meet occasionally to enjoy sex but don’t make any other emotional demands on each other. Some men live in successful three-way partnerships. No matter how unusual the relationship, the same simple rules apply. Relationships work best when the people involved communicate with each other and respect each other. Try not to be worried about the different types of relationship possibilities. You don’t have to do anything you don’t feel comfortable with. Chances are, whether you’re looking for one partner to settle down with, or several partners to have sex with, that you will be able to meet someone who meets your needs.
Children

Being gay does not automatically exclude you from being a parent — quite a few gay men are fathers. If you have children from a former heterosexual relationship, there are discussions that should take place during your process of coming out. If you don’t have children but would like to, there are other issues to consider. Children need committed parents. They need their parents’ time and energy and love. And they cost money.

If you decide to enter into an arrangement with a woman (lesbian or straight) to parent a child, you will need to be very clear about what’s involved. What will the living arrangements be like? What will the financial contributions involve? Who will have custody? Will you be known to the child as the father? Will you be named on the birth certificate? What are the implications of being named? What are your rights? Will you attempt insemination at home or through a fertility clinic? Is the latter legal in your state or territory? How will the parents relate to one another? And what if one or both of you have partners? How will the partners feel? How will they be involved?

Whatever your circumstances, being gay and out and choosing to be a parent require time and thought and planning and sensitivity. The same applies to those who have children from previous heterosexual relationships.

People Living With HIV or AIDS

Nearly 80 per cent of people living with HIV or AIDS in Australia are gay men. It is important to remember that people living with HIV or AIDS are a part of the gay community, contributing to and participating in the richness of gay life. Unfortunately discrimination towards people living with HIV or AIDS exists within some sectors of the gay community. It is important to consider your own situation — be it your sexuality, a health condition, or some other part of who you are — and think of the damage discrimination has, or may have, done to your life because of these factors. By understanding the impact discrimination can have on us individually we can better understand the harm it can cause others, such as people living with HIV or AIDS.

People living with HIV/AIDS live, play and share in the communities that we all participate in; we all come together at various points in time.

If you know that you are HIV-positive, there are a range of information and support services available to you. Please see the Directory at the end of this booklet for information. Contacting your local AIDS council or PLWHA organisation can be a good first step.
Where can I meet other guys?

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There are many places where gay men can go to meet each other. Some places are purely for social interaction, some are purely for sexual interaction and others are somewhere in between. Pubs, clubs and gay community groups are the more social of these settings, places where you can meet friends for a drink and maybe a dance.

Then there are your sexual needs. Beats and sex-on-premises venues such as backrooms and saunas are places where you can explore and fulfil your sexual desires with other men. Each place has its own environment and there are behavioural codes of conduct that are often unspoken. This next section describes what you should expect when going to these places for the first time and what sort of interactions might take place.

Social, sport, support and coming-out groups

When people talk about the gay community they often just mean the nightclubs and bars. However, most gay communities have newspapers and/or websites that list a wide range of groups that you can join to meet people. These include:

- sporting groups, such as gay bushwalking clubs or swimming groups
- coming-out groups, offered through AIDS councils or other gay health organisations
- community groups
- social groups, such as those for older gay men, or men who have previously been in relationships with women
- political groups, such as action groups or groups fighting for equality under the law
- religious groups, such as the Metropolitan Community Church; one of the oldest gay community groups
- special interest groups, such as gay car clubs or football fan clubs.

You can look for a group that reflects your interests or skills. Many gay men use these groups as a way to meet other men, finding them more social and real than venues and clubs. Groups also provide an opportunity to get to know other men without there being an emphasis on sex.

Bars and Nightclubs

Many gay men go to bars. They can be great places to meet other men for a chat, friendship or something more. If you are inclined to go for a look and a drink, the bar scene can provide a safe and friendly environment to meet other men attracted to men for social and other types of interactions. Not everyone in bars is looking for sex. This isn’t to say that cruising doesn’t happen in gay bars – it does. It’s quite possible to meet someone in a bar, have a good conversation and establish that there is a mutual attraction, then negotiate the possibility of going to their (or your) place or just exchange phone numbers. In the larger cities there are usually a few gay bars to choose from. Each has its own character and caters to different types of gay men. There are leather bars, cocktail bars, bars where younger guys hang out, bars where older guys hang out, bars that are mixed gay and straight, and ones that are mixed gay and lesbian. The choice is yours – it depends on who you feel most comfortable with. Check out the free gay papers or websites to get a sense of the sort of people who go to each venue. Some bars levy a door charge after a certain time at night. Gay nightclubs can be more full-on and intense than bars. Most of them open at about eleven or midnight and,
depending on the nightclub’s liquor licence, usually go well into the small hours of the morning. Apart from the social gathering, the attraction with nightclubs is, of course, the dancing, music and lights. The clubs usually have an entry fee at the door and drinks are usually more expensive than in bars.

The atmosphere at nightclubs is sometimes less cruisey. People are often more focused on dancing and hanging out with their friends. Again, that’s not to say there is no chance of getting lucky, it just works differently. The music is often loud and the venue quite dark and club goers generally aren’t there to strike up conversations with new people. You might also find that there is a more mixed audience at nightclubs. Women often go to them for the music and because they can enjoy themselves without men hitting on them. Sometimes even straight men might go to these places, usually on the arm of their partner.

Dance Parties

Dance parties are usually either annual events or linked in to some holiday like Easter or Australia Day. They can often have themes, and partygoers wear outfits in the style of the theme. Sometimes they celebrate aspects of a particular political, sexual or subcultural interest (e.g. leather). These parties can vary in size from a few hundred people up to ten or twenty thousand. The larger parties are often broken down into several smaller ‘venues’ that play different styles of music that vary from hip-hop to disco to hardcore house to rock. There are ‘chill-out’ areas where you can sit and relax and escape the mayhem of the dance arenas. People are usually quite friendly and you can sometimes get a sense of the community spirit, especially when the event has a political theme, like Sydney’s Gay and Lesbian Mardi Gras.

Beats

A beat is a public place where men meet for sex. Many men use beats as a way to meet other men; it is a practice that has been in existence for centuries. Many men find meeting men this way to be satisfying, both on a sexual and on a social level. Beats can include certain public toilets, parks, bushlands and beaches. Sometimes, either out of necessity or choice, men at beats have sex without a word being passed between them. There can be dangers associated with beats, such as gay bashers. If ever you do a beat, keep your guard up and be aware of who’s around.

The following tips will help you stay safe.

- Only do beats when you’re not drunk or on drugs. If you’re out of it and horny, call a chat line or an escort instead, or use an Internet chat room.
- Leave your wallet and valuables at home. Attacks at beats may involve theft. You don’t want anyone finding your ID.
- If you can, let someone know you’re going to the beat.
- Wear clothes and shoes you can run in if need be.
- Park your car in a discreet place.
- Know the surroundings – you may need a quick exit route and/or well-lit areas if you need to escape danger quickly.
- Don’t wear a personal stereo, iPod or headphones – you need to be able to hear what’s going on around you.
- Take condoms and water-based lube with you and use them if you have anal sex. You never know whether the guy you meet has the same HIV status as you, or whether he even knows his HIV status. Put used lube sachets and condoms in bins or take them with you. Litter can result in public complaints and draw police attention or bashers to beats.
• Stay away from anyone you think is suspicious – even if they look temptingly like your ‘type’. Be especially wary of groups of young men. If threatened, run away (if you can) and try to attract help by shouting ‘Fire!’ If you see anyone being hassled, call the police or yell. Take a note of the attackers’ details (appearance, car rego etc.) so you can identify them later.

• If you see someone being attacked, try to help them by following the advice in the above dot point.

• If you want to go somewhere with someone you meet at the beat, have a conversation with him first to see if you can establish some rapport or trust. Unless you feel comfortable, don’t take him home or go anywhere with him that is away from other people.

In all states and territories of Australia it is illegal to have sex in a public place. The wording of the legislation varies from state to state, but the offence usually includes having sex anywhere that is within the sight or hearing of the public, or to which members of the public have access. This includes parks, public toilets, beaches and change rooms.

Sex-on-premises venues

These are places where you can go to meet guys to have sex. They include both saunas and ‘dry’ venues such as backrooms and sex clubs. Often the sex people have is anonymous but sometimes sex parties are organised among friends.

The CD-ROM resource Sex in queer places, available at your local AIDS council, provides information about finding sex at beats, on the Internet, and in pubs and clubs, backrooms and other sex-on-premises venues. It also contains information on sexually transmissible infections (STIs), HIV and safe sex.

Saunas

Saunas have been described as beats where you wear a towel instead of clothes. In some ways this is right – by and large, people are there for the sex. However, the atmosphere in a sauna is very different from that of a beat. Firstly, you avoid the danger of being caught (by police, bashers or passers-by) that you have at a beat.

You have to pay to go into a sauna. The cost varies but is usually around $10 to $20. Most places have student and pensioner concessions. When you arrive you are usually given a locker key and towel. In most saunas you’ll find a lounge area with a television and a small café where you can get tea, coffee and snacks. There is usually a steam room and a dry Scandinavian-style sauna. There are showers and toilets, and sometimes a swimming pool and spa. Many saunas have dimly lit mazes, some with even darker corners or rooms off them, as well as a video lounge where gay porn videos are shown. Also, some saunas have gym equipment.

The feature common to all saunas is private cubicles and rooms in which to have sex. Most of these rooms have mattresses (which are vinyl coated for obvious reasons) and doors that are lockable from the inside. You can usually find condoms and water-based lubricant in the rooms, too. If you can’t, ask the attendant at the café or entrance for some.

Backrooms

These are usually small, dark rooms at the back of sex shops. There is a small entrance fee and condoms and lube are provided. There is also usually gay porn playing on television screens.
**Sex clubs**

These are like a cross between a beat, a sauna and a backroom. They’re like a beat because you keep your clothes on (unless there is a theme party, like an underwear party, going on). They are like a sauna because they are usually fairly large and have theme rooms and a lounge and video area. And they are like a backroom because they have many dark nooks and crannies to explore. There is usually a small shop where you can buy refreshments and other sex aid items. Condoms and lube are provided in the cubicles.

**Internet**

There are many places for men who are attracted to other men to meet on the Internet. One of the most popular places is the chat room. Chat rooms require you to create a profile, which usually details your physical attributes, a little bit about you, your likes and dislikes and a bit about what you are looking for either sexually or in a partner. Not all men on these websites are looking for sex; some are just looking for friends, companions or a place to discuss their feelings with other men.

You create your profile and log into the chat room (some sites let you see more pictures and send more messages if you pay a fee.) There you will find the profiles of a whole bunch of other guys for you to look at. After you find one you like you can send him a message. There is usually a bit of correspondence between you and if the feelings are mutual then you can arrange to talk over the phone or perhaps even meet face-to-face.

It’s common sense not to give out your personal details (e.g. your surname or phone number) until you’re sure that you’re interested in the person you’re chatting to and you have developed a certain level of trust. The same suggestions that apply to beats apply to hook-ups that you make over the Internet. Let someone know who you’re meeting, and where, if you can. It’s safer to arrange to meet in a public place such as a bar or café rather than give out your address. Be aware that some people use their computer profile to lie about themselves. You may decide you don’t want them to know where you live or work.

“Only do beats when you’re not drunk or on drugs. If you’re out of it and horny, call a chat line or an escort instead, or use an Internet chat room.”
Sex and gay men

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If you’re a man who is attracted to other men, then sex between yourself and another man can be one of the most exciting and satisfying sexual experiences you’ll ever have. For many gay men, sex is a private and enjoyable physical and emotional act. Same-sex acts can be found throughout nature in all species; never let anyone tell you that gay sex is not natural. Most ideas that straight people have about sex between men are simply not true. They are usually based on ignorance or homophobia. Just like straight people, gay men are different from each other. Some have lots of sex, some don’t. Some are into what might be seen as basic sex and some guys are into what may be seen as adventurous sex.

You may feel pressured or think that you need to have a certain type of sex to fit in as a gay man. Remember that being interested in or doing certain sexual acts, as opposed to others, does not make you more or less of a gay man. You need to be comfortable with the sex you are having. Having sex is an enjoyable part of being human, and should never happen without your agreement.

Discovering what kind of sex you want

All men have sexual desires, but they don’t necessarily know why they like one sex act more than another. Learning more about the sex acts you’re interested in will allow you to have more control over the sex you have, and will help you make informed choices. If you are not sure what to expect, and feel embarrassed, it might be worthwhile learning more about a particular sexual practice. This could put you at ease and allow you to explore and experiment.

The whys and whens of sex

When people talk about sex they often talk about the mechanics of it: what goes into where. When you have sex there are a lot of other things that might affect what happens. How you feel about yourself can have a big effect, not only on the kind of person you have sex with, but also on the sort of sex that you have. Sometimes you might want to have sex because you’re feeling great; other times you might want sex to cheer you up. However, if you are feeling down or angry you might take more risks. The place where you have sex, whether it’s in your own bedroom, someone else’s place or even in a public space, can affect what happens and how safe you feel to ask for what you need.

What is sex between men?

Sex is different things to different people — some people may consider mutual masturbation as sex, and some gay men think of sex as happening only when there’s penetration.
Foreplay and masturbation (wanking)

If you’re used to having heterosexual sex, you might find some gay sex confusing. What used to count as foreplay (eg. almost everything up to penetration) might now feel like real sex with another man. Kissing, caressing, touching and talking dirty are all forms of foreplay. Some men (gay or straight) don’t place a great deal of emphasis on foreplay for various reasons. Some men might feel uncomfortable with the intimacy that sometimes comes with foreplay. Or they may only be used to having quick sex. Foreplay can be a great lead-up to sex and can make sex with penetration even more erotic and sensual.

Masturbation is touching, rubbing and stroking your own penis, balls and sometimes anus for self-pleasure. Almost every man masturbates at some point in his life. Some men see masturbation as an extension of their sexuality and incorporate it as a part of their sex lives. Some men only use masturbation when they’re not getting any partnered sex. Either way, masturbation is healthy and for many men — straight or gay — it is an essential part of their sexuality.

Mutual masturbation

Mutual masturbation between men is the act of touching, rubbing and stroking each other’s penis, balls and sometimes anus. Mutual masturbation (whether at the same time or taking turns) is the most common sexual activity between gay men. Many men have been wanked while wanking another guy. Doing this to another man, or having it done to you, can feel very different from doing it to yourself. You may have to train your partner — by verbalising your needs or sending him physical messages — in how you like to be touched.

“It is a common belief that all gay men have anal sex, but in reality, 20% or 30% never do. Even those who sometimes have anal intercourse may not do it every time they have sex with a man.”
Finding out more about gay sex practices

If you want more information on gay sex practices, contact your local AIDS organisation and ask to speak to a gay men’s education officer or check out your local gay press to find a club that may specialise in certain sexual practices.

Be prepared to enjoy it

Like all sex, sex with men may be awkward for you at first. Relaxing and feeling confident are two of the main ways that you can improve your enjoyment before you even start. Having a good understanding of how HIV is passed on can also make sex more enjoyable, if only because sex is not much fun when you’re preoccupied with your risk of infection. Learning about how HIV is passed on will make you better able to decide how to reduce your risk of getting or passing on the virus yourself.

Oral sex

Oral sex is giving or receiving pleasure by kissing, licking and/or sucking another man’s penis or having that done to you. Most gay men practise some form of oral sex. They might refer to oral sex by terms such as blowjob, head job, sucking off or going down on someone.

Rimming

Rimming is also a practice that some gay men do. It is when a man licks and tongues another man’s anus. This may sound a bit extreme if you’ve never done it before. The lining of the anus is quite sensitive and this can feel very enjoyable.

Anal sex

Anal intercourse is when a penis is inserted into the anus. It is a common belief that all gay men have anal sex, but in reality, 20% or 30% never do. Even those who sometimes have anal intercourse may not do it every time they have sex with a man. There are also men who enjoy anal penetration but are not sexually attracted to men.

The act of anal sex has long been stigmatised, particularly for those who took the receptive or ‘bottom’ role. In recent decades there has been a shift in attitudes towards anal sex and the receptive role is no longer necessarily seen as passive or feminine, making it easier for more men to acknowledge that they like it. Many gay men enjoy both top (insertive) and bottom roles, that is, they are versatile.

Unprotected anal sex between partners of different HIV status is the primary route of HIV transmission. Using condoms for anal sex significantly reduces the risk of HIV transmission.
Health risks and sex – looking after yourself

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Practising safe sex is the only way to avoid getting or giving HIV and/or various other STIs (sexually transmissible infections). As far as HIV is concerned, safe sex is any sexual contact that avoids semen, blood or vaginal fluid getting into the bloodstream of another person. Extra care is needed to prevent the transmission of other STIs like gonorrhoea or herpes [see the section ‘Other sexually transmissible infections (STIs) and blood-borne viruses’ below].

**HIV / AIDS**

HIV has been around in Australia for over 20 years. The gay community has responded well to HIV/AIDS. Safe sex happens much more in the gay community than in other parts of society. However, in recent years, the numbers of new people getting HIV has risen. This may be due to a number of factors. HIV is not in the headlines as often as it used to be and some younger gay men have very little or no experience of the HIV epidemic. Some people also mistakenly think that new treatments make it easy to manage HIV once you have it, so they don’t think they have to be as careful as they once were.

It’s up to you, if you don’t have HIV, to protect yourself against HIV through safe sex practice (and safe injecting practice, if you are an injecting drug user). If you do have HIV it’s up to you to not pass it on. All gay men, whatever their HIV status, have the responsibility of making sure that there is no further increase in HIV. Not all gay men know their HIV status. Some might be HIV-positive and not know it. While you cannot control what others do (though you might teach others about what’s safe and what’s not), you can control what you do.

Therefore, safe sex is a must.
How is HIV passed on?

**Semen (cum)**, pre-ejaculatory fluid (pre-cum), blood and vaginal fluids can pass on the virus.

For a person to be infected three things have to happen:
- there has to be HIV in the body fluid
- there has to be enough HIV to cause infection
- it has to get into another person’s bloodstream.

Without these three things HIV cannot be passed on.

You cannot get HIV from:
- casual contact, including sharing drinking glasses and cutlery
- body contact such as hugging, cuddling, massaging or kissing.

And with care you are highly unlikely to get it from:
- caring for someone who is HIV positive.

Safe sex and HIV

For HIV to be passed on, an amount of the virus has to pass from the body of someone with HIV into the body of someone without HIV. Put another way, if a person is HIV-positive their semen or blood has to enter the bloodstream of the HIV-negative partner through an opening in that person’s skin or mucous membrane. The riskiness of any sex act can be worked out using this basic rule.

**Anal sex**

Anal intercourse is the most common way for HIV to be passed on between gay men, particularly if the HIV-positive partner ejaculates inside the other man. During sex, the lining of someone’s anus or rectum can easily become slightly damaged, allowing infected semen or pre-cum to enter a person’s bloodstream. Wearing a condom and using plenty of water-based lubricant prevents this from happening. Scientists have found relatively high quantities of HIV in the lining of the rectum and during sex this can easily enter the body through the eye of the penis (the urethral meatus) or the foreskin, particularly if the insertive partner is uncircumcised.

In anal sex the risk is much greater than in other sex acts. HIV can easily enter the other person’s bloodstream during anal sex. So it’s always safer to put a condom on before you have any anal contact. If you wear a condom and reapply water-based lubricant often during anal sex, the risk of HIV transmission can be significantly reduced.

There is also some evidence that a high viral load increases the chance of HIV transmission. This means that an HIV-positive person who has a high concentration of virus is more likely to pass on HIV. HIV treatment usually reduces a person’s viral load and, while not eliminating the risk of HIV transmission, does make transmission somewhat less likely.

**Oral sex**

Oral sex (fellatio) is much less risky than anal intercourse. However, during oral sex there is a small risk of HIV being passed on if an HIV-positive guy comes in the mouth of an HIV-negative guy, or if the insertive partner (the man being sucked) has any damage to his penis such as a piercing or a sore from an STI. Your mouth constantly suffers from minor damage (little grazes or tears, perhaps invisible) as a result of eating or brushing. Ulcers, bleeding gums and sore throats can all present an opening through which HIV can enter.

The risk is still relatively low: there have been only a small number of known cases of people getting HIV from oral sex.
In almost all of these cases the person had some kind of sore, wound, cut or infection in their mouth or their penis. It is not easy for HIV to enter the bloodstream via the mouth or throat when sucking.

The safest way to have oral sex is with a condom. However, Australian safe sex guidelines recommend only that condom use be considered when the condition of the mouth of the person giving oral sex is poor (e.g. if there are cuts or ulcers), although, it can be difficult to tell. Infection occurs when virus passes through cuts or abrasions, so if the condition of the mouth (or penis) is compromised, condoms should be used. Remember, too, that there is a higher risk than usual if the person having his penis sucked is HIV-positive and has a high viral load. If you want to use condoms for oral sex, shop around for a brand you like the taste of.

You have to decide what feels safe for you. You might only want to suck and lick the outside of his penis and not take the head of it into your mouth. You might feel safe taking it all into your mouth, but don't want him to come in your mouth. If a man does come in your mouth it is safer to swallow it immediately or spit it out rather than let the semen stay in your mouth. Everyone makes different choices. You don't have to do what your partner does – decide for yourself.

Rough oral sex or deep-throating can damage the lining of your throat, creating a risk of HIV being passed on if he comes in your mouth. Many couples choose to do it more safely by pulling out before coming. Pre-cum, which usually contains much less HIV than semen, is thought to present little or no risk during oral sex.

If you are HIV-positive, you might prefer to be the one who is sucking off the other person (giving head). The chances of passing on HIV from your mouth to his penis are low. Saliva (spit) contains only the smallest amounts of HIV.

**Mutual masturbation**

Mutual masturbation is one of the safest sex acts you can do. Providing no semen or blood is present, kissing, licking and sucking any part of the body is totally safe, as are most forms of touching, feeling, rubbing, masturbating and fingering. The risk only exists if you have a cut or opening in your skin and semen or blood comes in contact with that opening. Remember, if you use any kind of oil-based lube, don't fuck afterwards, as the oil may damage the condom.

**Rimming**

Rimming poses very little threat for HIV being passed on. It can, however, pass on bugs and viruses such as hepatitis A. Washing before rimming reduces the risk of passing on any of these infections. Faeces (shit) can contain many germs (or ‘bugs’). HIV is not likely to be one of them unless blood is present. Some people use plastic cling wrap or dental dams for rimming.

**Sex toys**

If you use sex toys like dildos or vibrators, it is best not to share them during sex. There is a risk of HIV and other STIs being passed on if they are not cleaned with warm water and soap between partners. Some people use condoms on their toys. Others prefer to use only their own toys.

**Other sex acts**

There is a range of other different sex acts not covered here. You can find out about these in other places listed in the directory at the end of this booklet. Just remember to follow the simple guide on how to stay safe from HIV and other STIs so that you can enjoy a long, healthy sex life.
Condoms

Using condoms with a water-based lubricant is the best way to reduce your risk of getting or passing on HIV and other STIs and blood-borne viruses. Condoms prevent HIV being passed on. Try experimenting with condoms before using them for sex. Find a brand and size that suits you. Get used to how they feel. Masturbate with them on.

When you use a condom during sex:

• put the condom on before you start to have sex, not just as you’re about to come
• unwrap the condom carefully and make sure it’s the right way around
• roll the condom all the way to the base of your penis
• use water-based lube such as K-Y jelly, Wet Stuff or Glyde on the condom and in and around the anus. Saliva (spit) should not be used as a lubricant
• do not use oil-based lubricants such as Vaseline, baby oil or hand creams, as these weaken the latex of the condom and can cause it to break
• when you pull out, hold on to the base of the condom so it doesn’t slip off
• never re-use a condom. Dispose of it carefully (in the rubbish bin, not the toilet).

Some other condom tips:

• don’t use out-of-date condoms – always check the expiry date
• be sure to use condoms made to Australian Standards; check on the outside of the pack
• never leave condoms out in the sun, or near sharp objects, or in the glove box of your car or wallet for long periods

• some breakages occur because of people wearing the wrong size of condom – but it’s not length that matters, it’s diameter. Condom boxes are labelled with width measurements so that you can choose.

Using condoms in long-term relationships

Using condoms remains the safest way of having anal sex, but if you’re in a long-term sexual relationship you may choose to have sex without condoms, maybe to show that you trust or love each other.

Choosing to have sex without condoms means a lot of talking first, getting tested for HIV to find out if you both have the same HIV status, and having an agreement about what to do if you need to return to using condoms. It also means being able to trust each other to always tell, and be open to hearing the truth. If you are in a sexual relationship and you want to have sex without condoms, there are some steps you can take together:

Talk about it. The first and most important step towards fucking without condoms is discussing the issue with your partner. Some couples find talking easy; others may need to meet with a counsellor or support person.

What happens if one of you gets a HIV-positive test result and the other is HIV-negative? What if you are both HIV-positive? These are important issues and they are discussed elsewhere in this booklet.

Both get tested. Be completely honest about your test results or agree to get tested and collect the results together. Be prepared that you, your partner or both of you might test HIV-positive. Counselling and support are always available through the agencies listed in the back of this book. Even if your tests are HIV-negative, keep using condoms when you have sex. Then ...
Get tested again. Eight weeks later, get tested again. It can take that long for the HIV antibodies to show. If both of you are HIV-negative, you can move on to the next step.

Reach a clear agreement about sex inside and outside the relationship. Possible agreements include: (a) no condoms together; (b) no anal sex outside the relationship; (c) all anal sex outside the relationship is with a condom and lube; or (d) no sex outside the relationship. Remember that people don’t always stick to agreements, and that accidents can happen. If a slip-up occurs, it doesn’t have to mean the end of the relationship. It does mean that you will both have to go back to using condoms again. Don’t punish each other for telling the truth. Agree to start the process again – together.

If either of you have unsafe sex outside the relationship, you will need to begin using condoms again inside the relationship, and get tested again, and then a second time eight weeks later. Trusting each other again can take a lot of time and effort, and you might benefit from advice from a GP or counsellor, particularly to help reduce the chances of unsafe sex happening again (see ‘Who can help?’).

If one of you turns out to be HIV-positive and the other is HIV-negative it doesn’t have to mean the end of the relationship, but it does mean that you should be using condoms. There are quite a few successful relationships where one partner has HIV and the other doesn’t. Anal sex without condoms between an HIV-positive and an HIV-negative person is very risky sex.

If you’re in this type of relationship you may place most importance on not passing on HIV. You might always use condoms for anal sex and have a ‘never come in the mouth’ agreement for oral sex. One or both of you may also have sex outside the relationship, always keeping these sexual contacts safe – by using condoms. You will probably also decide to have regular check-ups for STIs to keep each other safe.

If both of you turn out to be HIV-positive then the choice to have sex without condoms is yours. Some HIV-positive couples always have protected sex. Some don’t. Remember if you choose to have sex without condoms, you risk coming into contact with STIs and other infections that may work with HIV to further damage your immune system. Talk about what’s right for you and your relationship.

If you’re both HIV-positive and you’ve compared your viral loads and found they are at undetectable levels, you may decide to have sex without condoms. You might also decide this after discussing treatment histories together with each other’s doctors and finding that neither of you has a resistance to any HIV drug. You may further agree to not expose each other to any other STIs by keeping sex within the relationship. Remember, some men believe that having sex without condoms is a way that you can demonstrate trust and intimacy in a relationship. Others have thrown away the condoms and then talked about getting tested. Many men have got HIV because one or both men mistakenly believed that they or their partner were HIV-negative.

All these examples are different, but the men involved share one important thing: they have all talked about and made informed choices about the sex they have.

If you’ve had unsafe sex

Post-exposure prophylaxis (PEP)

If you’re HIV-negative and you have had unprotected intercourse or a condom has broken, there is a treatment option available that may prevent you getting HIV. PEP involves taking a combination of at least two anti-HIV drugs for 28 days. Like other HIV treatment regimes, PEP must be taken at strict times of the day. Taking PEP after you might have had unsafe sex with someone who has HIV will not
necessarily prevent infection. HIV, like any virus, works by infecting some cells and then spreading to other cells. It may take a few days for HIV to really get into your body. PEP tries to stop HIV growing in those first cells. The cells then die naturally within a short time, without having made more HIV. The drugs used for PEP are the same anti-HIV drugs used to treat HIV and can create side effects similar to the ones experienced by positive people taking them – nausea, diarrhoea, headaches and tiredness. PEP may be able to stop HIV infection, but you have to act fast. The earlier you start the treatment, the better. PEP should be taken as soon as possible, preferably within a matter of hours – but no more than 72 hours after the exposure event.

At the time of writing, PEP is only officially available in New South Wales, the Australian Capital Territory, Queensland, Victoria and Western Australia. PEP is available on a limited basis in other parts of Australia. If you are HIV-negative and you might have been exposed to HIV, you should seek medical advice as soon as possible. The easiest way is to contact an HIV prescribing doctor or sexual health centre. If these are not open at the time, accident and emergency departments at major hospitals should be able to help. For advice on where to get PEP please call the following numbers:

• NSW residents - 1800 PEP NOW (1800 737 669)
• Victorian residents - 1800 889 887
• Western Australian residents - 1300 767 161

A national list of services where PEP is available can be found at www.getpep.info.

Other sexually transmissible infections (STIs) and blood-borne viruses

Chlamydia

What is it? Chlamydia is a common infection caused by bacteria. The same bacteria can also cause infections in the urethra, the throat and the anus. It may show symptoms similar to gonorrhoea.

How is it passed on? By giving or receiving anal sex, oral sex, and arse play such as fingering and fisting with someone who already has chlamydia.

What are the signs and symptoms? It is quite common to have no symptoms at all. If you do get them, they often show up seven to 21 days after being exposed. The symptoms might be:

• a watery, white discharge from your penis
• itching or pain in the eye of your penis that often fades after you urinate.

How can it be tested for and treated? Chlamydia can be diagnosed from a urine test, a throat swab or an anal swab. It can be treated with a course of antibiotics.

Prevention: Although using a condom helps to prevent chlamydia, sex that prevents HIV being passed on is not completely safe for chlamydia. Chlamydia can be transmitted by skin-to-skin contact with an infected area.

Tip: Urinating immediately after having sex can lower your risk of getting chlamydia, but this strategy does not eliminate the risk altogether.
**Crabs**

**What are they?** Crabs are tiny flea-like bugs, sometimes called pubic lice, which live on your skin at the base of your pubic hair. Crabs lay eggs that are attached to the hairs and are usually seen in the pubic area. Crabs can also be found in beards, armpits, chest hair and eyelashes.

**How are they passed on?** By close physical contact, or sharing clothes, sheets or towels.

**What are the signs and symptoms?** Crabs can cause an intense itching in the pubic regions. A person who has crabs can usually see them by looking closely in their pubic hair. Crabs appear as tiny brown lice and their eggs, which are white and known as nits, are attached to the base of the pubic hair. Crabs may take three days to several weeks after contact to show up.

**How can they be treated?** You can cure crabs yourself with crab or lice shampoos and creams you can get from the pharmacy. To prevent getting crabs again, wash everything that may have come into contact with them, including bed linen, clothes, towels and underwear, in warm soapy water. Your partners and anyone in close physical contact should also be treated. It’s best to repeat the treatment after seven days.

**Genital warts, anal warts**

**What is it?** A virus called HPV (human papillomavirus) causes genital and anal warts. Warts may be on the penis, anus or surrounding areas.

**How are they passed on?** By skin-to-skin contact with someone who has the virus. Warts can also be passed on during foreplay when infected areas come into contact with another person.

**What are the signs and symptoms?** There may be no symptoms but they can include small bumpy warts around the penis, balls and anus and it might hurt or ache when going to the toilet if your anus is infected. Warts are often painless. They usually show up two to three months after getting the virus, but it may take longer.

**How can they be tested for and treated?** A doctor can remove the warts by freezing, burning or laser, or by applying liquid wart paints or creams. If you have the wart virus, you always have it, and the warts may later grow back or appear in different places.

**Gonorrhoea**

**What is it?** It’s a bacterial infection of the penis, anus, throat or eyes.

**How is it passed on?** By giving or receiving anal sex, oral sex, and arse play such as fingering and fisting with an infected person. Touching an infected penis or anus and then touching your own penis, anus or eyes can pass on gonorrhoea.

Using a condom and lube helps to prevent you from getting it, but safe sex for HIV isn't completely safe for gonorrhoea.

**What are the signs and symptoms?** It’s quite common to have no symptoms. However, symptoms can include:
- a dry, sore throat
- itchiness and pain during bowel movements
- a clear or yellow discharge from the penis
- pain or burning when urinating.

These symptoms can take from two to 10 days to show up after you first become infected.

**How can it be tested for and treated?** A doctor tests you using a penile swab, a urine test, a throat swab or an anal swab (see Testing, below, for what these are). Gonorrhoea is easily cured with antibiotics.
**Hepatitis A**

**What is it?** Hepatitis A (hep A) is a virus that damages your liver.

**How is it passed on?** By small particles of infected faeces (shit) entering a person’s mouth through activities like **arse play** and **rimming**, or by not washing your hands after sex with someone who has it. However, it is most often passed on through using eating and drinking utensils previously handled by someone who has it, or by sharing a cigarette, joint or bong.

**What are the signs and symptoms?** You may have a mild flu-like illness, fever, tiredness, loss of appetite, vomiting, pain in your guts and yellowing of the skin and eyes (jaundice). These generally take two to four weeks to show up. Hep A can be a very serious illness, but in most cases people fully recover. Hep A can last anywhere from a week to several months.

**How can it be tested for and treated?** A blood test will show whether or not you have hepatitis. If you get hep A once, or if you had it as a child, you can never be infected with the virus a second time. There is an injection you can have (a vaccination) to stop you getting hep A.

**Hepatitis B**

**What is it?** Hepatitis B (hep B) is a virus that can cause severe damage to your liver.

**How is it passed on?** By infected blood getting into your body through oral sex, unprotected anal sex, sharing injecting equipment, toothbrushes or razors, or through tattooing or body piercing with non-sterile equipment. It can also be spread by:
- using instruments such as tattooing and body piercing equipment that have not been properly cleaned and sterilised
- sharing razor blades, toothbrushes or snorting equipment
- one person’s infected blood coming into contact with open cuts on another person.

There is a small risk of hep C transmission during sex. This is an issue mainly for people involved in sexual practices where blood may be present, such as fisting or some BDSM activities, and is a greater risk for HIV-positive men.

**What are the signs and symptoms?** Many people who acquire hep C have no symptoms when they first acquire it. Others may experience a minor flu-like illness that does not require treatment. About a quarter of the people who acquire (jaundice) and dark urine. These symptoms can take one to six months to show up. Hep B can vary from very mild to very severe and can sometimes cause death. Most people recover fully. In a few people, infection can persist and result in liver damage and liver cancer.

**How can it be tested for and treated?** A blood test is used to diagnose hep B. There is no cure for hep B but there are treatments. Most people get a bad infection with no real long-term consequences. See your doctor.

There is an injection you can have (a vaccination) to stop you getting hep B.

**Hepatitis C**

**What is it?** Hepatitis C (also called hep C or HCV) is a virus that can cause damage to your liver, with some people developing serious diseases of the liver in later years.

**How is it passed on?** By blood infected with hep C getting into your bloodstream. Most people in Australia with hep C have got it by sharing needles and syringes or other injecting equipment. It can also be spread by:
- using instruments such as tattooing and body piercing equipment that have not been properly cleaned and sterilised
- sharing razor blades, toothbrushes or snorting equipment
- one person’s infected blood coming into contact with open cuts on another person.

There is a small risk of hep C transmission during sex. This is an issue mainly for people involved in sexual practices where blood may be present, such as fisting or some BDSM activities, and is a greater risk for HIV-positive men.

**What are the signs and symptoms?** Many people who acquire hep C have no symptoms when they first acquire it. Others may experience a minor flu-like illness that does not require treatment. About a quarter of the people who acquire
hep C clear the infection from their bodies, so they still have antibodies to the virus but do not have the virus in their blood. The others become chronically infected, but many of them still have no symptoms. Others have symptoms such as:

- mild to severe tiredness
- loss of appetite
- feeling sick and vomiting
- soreness in the upper right part of the belly under the ribs
- fever
- pain in the joints (e.g. elbows, knees).

Tiredness is the most common symptom.

How can it be tested for and treated? A blood test is the only way to confirm if you have hep C. There are drugs that can currently treat chronic hep C, but they often have serious side effects, including severe depression, and they are not always effective.

There is no injection (vaccine) available to stop anyone from getting hepatitis C.

Herpes

What is it? A virus called HSV (herpes simplex virus) causes genital herpes. There are two types of HSV. Type 1 is more often found around the mouth as cold sores, but can also infect the genital area. Type 2 is usually found around the penis or anal areas, causing genital herpes, but can also infect the mouth.

How is it passed on? By both sexual and non-sexual skin-to-skin contact by:

- direct contact with a sore
- mouth (infected with cold sores) to your genitals
- genital herpes to your mouth
- genital-to-genital.

Herpes can also be passed on when there are no obvious symptoms present.

Condoms can reduce the risk of getting herpes but do not always cover the infected area. The virus may be present on your balls or anal area. Herpes sores can make other infections, such as HIV, easier to get or pass on to others.

What are the signs and symptoms? There may be no symptoms but, if there are, symptoms include:

- itching or tingly feeling around the infected area
- an outbreak of painful blisters or sores which later form scabs
- a flu-like illness.

If symptoms are going to happen they generally show up between two and seven days after you get herpes, but it may take much longer.

How can it be tested for and treated? A blood test can determine if you have come into contact with herpes. There is no cure, but there are treatments that can reduce symptoms, speed up your recovery and reduce the risk of passing on the virus. Whether or not you get repeated outbreaks differs for each individual, but outbreaks may happen less frequently over time, and may eventually stop altogether.

Scabies

What is it? Scabies is an infection caused by tiny mites (smaller than crabs) that burrow under your skin.

How are they passed on? By skin-to-skin contact, sexual or otherwise.

What are the signs and symptoms? Scabies are tiny and hard to see. Usually you get a rash or itching caused by the mite burrowing under the skin to lay eggs. They prefer warm areas such as the armpits and groin but can also be found in the spaces between your fingers and the toes. Scabies usually are noticed about four weeks after contact.
How can it be tested and treated? You can cure your scabies yourself using scabies lotions available at a pharmacy. To stop scabies from coming back you’ll need to wash everything (including bed linen, clothes, towels and underwear) that may have come into contact with the mites, using hot soapy water. All contacts, including people you live with, need to have treatment and it is best to repeat it after seven to 10 days.

**Syphilis**

**What is it?** Syphilis is caused by a bacterial infection in your blood.

**How is it passed on?** By giving or receiving anal sex or oral sex, and through **arse play** with an infected person.

**What are the signs and symptoms?** It is common for the symptoms of syphilis to go unnoticed. The signs and symptoms of syphilis usually follow three stages.

**STAGE 1:** A painless red sore on your penis, balls, mouth, throat or anus, which turns into a scab and then heals. Early stages of infection may show up 10 days to three months after you get it.

**STAGE 2:** A rash on the palms of your hand, soles of the feet or other parts of your body. As well as rashes, stage 2 symptoms can include fever, swollen lymph glands, sore throat, patchy hair loss, headaches, weight loss, muscle aches, and tiredness. These symptoms usually occur seven to 40 weeks after infection.

**STAGE 3:** If untreated, syphilis remains in your body and begins to damage your internal organs, including the brain, nerves, eyes, heart, blood vessels, liver, bones, and joints. In about one-third of untreated people, this internal damage shows up many years later in the late or tertiary stage of syphilis. This damage may be serious enough to cause death.

How can it be tested for and treated? The test for syphilis is a blood test, which can easily be done using the same blood taken for HIV testing. Syphilis is easily cured with antibiotics. If left untreated for many years syphilis can cause serious damage to any organ in the body, but this rarely happens, because it is usually treated.

**Syphilis and HIV:** If you are HIV-positive, it’s important to be regularly tested for syphilis. Syphilis can act more quickly in people who are HIV positive. This means faster progression through the stages (above), and also a greater chance of damage to the nervous system. Having syphilis can also lead to more rapid onset of HIV disease and AIDS.

**Testing for STIs**

Various types of tests are used to diagnose the different STIs. They include:

- **blood tests,** where some of your blood is taken, using a needle
- **a urine test,** where you have to piss into a small container
- **a throat swab,** where a small cotton bud is wiped on the back of your throat to get the sample
- **a penile swab,** where the cotton bud is put down into the hole at the tip of your penis. (Penile swabbing is rarely performed and has largely been replaced by urine tests).
- **an anal swab,** where the cotton bud is wiped just inside your anus.

The samples are then sent away to be tested and you will be asked to come back to the doctor or clinic to find out the results. If you are having sex with different casual partners, it is a good idea to get tested at least every six months. Even if you show no symptoms, it is possible to have an STI and pass it on. Testing is the only way to know.
Telling recent sex partners you have an STI

If you have an STI, you will need to tell all the people you’ve had sex with recently and suggest they get tested. If you are worried about doing this it may help to talk to your doctor, counsellor or friends about ways of doing it. One option is to tell your recent sex partners anonymously through the website www.thedramadownunder.info

Drugs, alcohol and sex

Drinking is a common pastime at most gay venues and clubs. You might find that having a drink can help with being out on the scene or in talking to others. Using drugs or alcohol can affect the choices you make about sex and how you tell your partner what you want.

It’s a good idea to get together whatever you need for safe sex before you start using drugs or alcohol. Make sure that you’ve always got condoms and water-based lubricant with you – this can make it easier to stick to decisions about what you want to do. Alcohol and drug taking may contribute to sexual risk taking. It may interfere with your usual decision-making processes. Being ‘out of it’ could provide an excuse for risky behaviours.

“Remember if you choose to have sex without condoms, you risk coming into contact with STIs and other infections that may work with HIV to further damage your immune system. Talk about what’s right for you and your relationship.”

In all states and territories of Australia it is illegal to use prohibited drugs. The penalties for use of prohibited drugs vary from state to state and many include imprisonment.
Who can help?

Choosing your personal support 72
A network of friends 72
Community organisations 73
Social groups (support, sporting, hobbies) 73
Deciding to ‘come out’ presents a lot of issues for you to think and worry about and almost all men who have been through this have needed some form of support during that time. Remember, you’re not alone: there are a variety of services available to you that can help and provide support.

Choosing your personal support

Support can take many different forms. Support can mean just a good friend being there for you, helping you by going with you the first time you go to a gay bar or nightclub, for example. Support can also come from a counsellor or therapist. A lot of people see counsellors so that they can get support at a difficult time of change in their lives. Talking to a professional outside the situation can sometimes help. The directory at the back of this booklet lists the different kinds of services. There are also state-run counselling services that offer support and referral for gay men who are coming out or facing some other difficult time in their lives.

Community organisations

If you’ve only just reached the stage of dealing with being attracted to other men there are plenty of courses for you. Most of these are organised by the state AIDS Councils and run over several weeks. Most people who go to AIDS Councils do not have HIV or AIDS, so don’t worry about other people thinking this when you go there. A typical course might discuss identity, coming out and homophobia, relationships, safe sex, drugs, and the gay community. AIDS Councils also offer care and support services, advice, counselling, education and advocacy, and HIV legal referral advice. Positive Living Centres, which are run for people living with HIV/AIDS (PLWHAs), offer advice, counselling and support services to people living with HIV. There are also many community-based organisations that provide a range of services to the gay community.

Western Australia, South Australia, Queensland, Victoria and New South Wales all have gay newspapers. These are also online so they can be read in other states and territories too. There are also magazines with plenty of info on what’s happening in the gay community (details at the end of this section). For those states that don’t have media: Queensland media often run advertisements for the Northern Territory; Victoria does it for Tasmania; and New South Wales media often run advertisements for the ACT.

A network of friends

As time goes on you will find that you are developing a number of friends who accept you for who you are now. They may only know the ‘new’ you. For many gay men, especially those who have been rejected by their families, their friends are the people who see them through the good times and the bad. One of the good things about the gay community can be the closeness of your chosen ‘family’.

Social groups (support, sporting, hobbies)

There are plenty of community groups that get together regularly. So if you’re into motorbikes, classic cars, volunteering, food and wine or just about any other hobby you can think of, there’s bound to be a group of gay guys who share your interests (also see ‘Where can I meet other guys?’)
**Directory**

### AIDS Councils

**AIDS Action Council of the ACT (AACACT)**
16 Gordon Street
ACTON ACT 2601
(02) 6257 2855
aidsaction@aidsaction.org.au
www.aidsaction.org.au

**ACON**
9 Commonwealth Street
SURRY HILLS NSW 2010
(02) 9206 2000
TTY (02) 9283 2088
Freecall 1800 063 060

**Positive Living Centre Sydney**
(02) 9699 8756

**Western Sydney**
(02) 9204 2400

**Hunter Newcastle**
(02) 4927 6808

**Illawarra Wollongong**
(02) 4286 1163

**Mid North Coast Port Macquarie**
(02) 6584 0943

**Northern Rivers Lismore**
(02) 6622 1555
Freecall 1800 633 637
acon@acon.org.au
www.acon.org.au

**AIDS Council of South Australia (ACSA)**
64 Fullarton Rd
NORWOOD SA 5067
(08) 8354 1611
TTY (08) 8362 0306
Freecall 1800 888 559
information@acsa.org.au
www.acsa.org.au

**Northern Territory AIDS and Hepatitis Council (NTAHC)**
46 Woods Street
DARWIN NT 0800
(08) 8941 1711
14 Railway Terrace
ALICE SPRINGS NT 0870
(08) 8953 3172

**Gay, Lesbian and Sistergirl Support**
(ATSU Program)
(08) 8941 1711
Freecall 1800 880 899
info@ntahc.org.au
www.ntahc.org.au

**Tasmanian Council on AIDS Hepatitis & Related Diseases (TasCAHRD)**
319 Liverpool Street
HOBART TAS 7000
(03) 6234 4242
Freecall 1800 005 900
mail@tascahrd.org.au
www.tascahrd.org.au

**Queensland Association for Healthy Communities (QaHC)**
30 Helen Street
NEWSTEAD QLD 4006

**Men's Sexual Health**
1800 155 141

**Brisbane & Southern Qld**
(07) 3017 1777

**Cairns & North Qld**
(07) 4041 5451

**Sunshine Coast & Central Qld**
(07) 5451 1118
info@qahc.org.au
www.qaehc.org.au

**Victorian AIDS Council/Gay Men's Health Centre (VAC/GMHC)**
6 Claremont Street
SOUTH YARRA VIC 3141
(03) 9865 6700
Freecall 1800 134 840
enquiries@vicaids.asn.au
www.vicaids.asn.au

**Positive Living Centre**
55 Commercial Road South
Yarra, Vic 3141
(03) 9863 0444

**Western Australian AIDS Council (WAAC)**
664 Murray Street
WEST PERTH WA 6005
(08) 9482 0000
waac@waaids.com
www.waaids.com

### Counselling and Support Services

**NEW SOUTH WALES**

**NSW Gay and Lesbian Counselling Service**
(Telephone-based counselling service Mon 6.30pm-9.30pm; also runs a “Coming Out” Group)
(02) 8594 9596 or
Freecall: 1800 184 527
www.glcsnsw.org.au
admin@glcsnsw.org.au

**Mature Aged Gay (MAG) Men’s Group**
(02) 9206 2072 or
sostrow@acon.org.au

**Tasmanian Council on AIDS Hepatitis & Related Diseases (TasCAHRD)**
319 Liverpool Street
HOBART TAS 7000
(03) 6234 4242
Freecall 1800 005 900
mail@tascahrd.org.au
www.tascahrd.org.au

**Queensland Association for Healthy Communities (QaHC)**
30 Helen Street
NEWSTEAD QLD 4006

**Men’s Sexual Health**
1800 155 141

**Brisbane & Southern Qld**
(07) 3017 1777

**Cairns & North Qld**
(07) 4041 5451

**Sunshine Coast & Central Qld**
(07) 5451 1118
info@qaehc.org.au
www.qaehc.org.au

**Victorian AIDS Council/Gay Men’s Health Centre (VAC/GMHC)**
6 Claremont Street
SOUTH YARRA VIC 3141
(03) 9865 6700
Freecall 1800 134 840
enquiries@vicaids.asn.au
www.vicaids.asn.au

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55 Commercial Road South
Yarra, Vic 3141
(03) 9863 0444

**Western Australian AIDS Council (WAAC)**
664 Murray Street
WEST PERTH WA 6005
(08) 9482 0000
waac@waaids.com
www.waaids.com

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1800 155 141

**Brisbane & Southern Qld**
(07) 3017 1777

**Cairns & North Qld**
(07) 4041 5451

**Sunshine Coast & Central Qld**
(07) 5451 1118
info@qaehc.org.au
www.qaehc.org.au

**Victorian AIDS Council/Gay Men’s Health Centre (VAC/GMHC)**
6 Claremont Street
SOUTH YARRA VIC 3141
(03) 9865 6700
Freecall 1800 134 840
enquiries@vicaids.asn.au
www.vicaids.asn.au

**Positive Living Centre**
55 Commercial Road South
Yarra, Vic 3141
(03) 9863 0444
VICTORIA
Gay and Lesbian Switchboard
(6pm - 10pm except Wed 2pm - 10pm)
(03) 9827 8544 or Freecall: 1800 184 527
HIV and Sexual Health Connect Line
1800 038 125
ALSO Foundation
Alternative Life Styles Organisation (ALSO)
works to enhance the lives of Victoria’s diverse gay, lesbian, bisexual and transgender communities.
(03) 9827 4999
www.also.org.au
also@also.org.au
SOUTH AUSTRALIA
Gay & Lesbian Community Services of South Australia
(08) 8334 1623
Freecall: 1800 182 233
www.glcssa.org.au
Man2Man Information Line
(Monday to Friday from 9.30 to 5pm) Sexuality, Health, Info and support for guys attracted to other guys. City callers: (08) 8334 1617 Country callers: 1800 671 582
QUEENSLAND
Gay & Lesbian Welfare Association
(07) 3017 1717 or Freecall: 1800 184 527
www.glwa.org.au
mailbox@glwa.org.au
WESTERN AUSTRALIA
AIDSline
(Information, referral and advice on HIV/AIDS, sexual health and STIs)
(08) 9482 0044
www.waaidslines.com
Men’s Line
(Information and referral for guys attracted to other guys)
(08) 9322 8401 or Freecall 1800 671 430
www.projectx.net.au
Project X
(WA AIDS Council’s MSM/Gay Program website for MSM/gay men in Perth)
(08) 9482 0000
www.projectx.net.au (See Programs)
Gay & Lesbian Community Services of Western Australia
(Mon - Fri 7pm - 10pm)
(08) 9420 7201
Freecall: 1800 184 527
www.glcs.org.au
NORTHERN TERRITORY
GLBTI support programme – NTAHC
(08) 89 411 711
Free call: 1800 880 899
Gay and Lesbian Liaison Officer
Northern Territory Police
(08) 89 278 888 or 131 444
Darwin–Katherine–Tennant Creek–Alice Springs
Men’s Social and Support Group
absolutelybooks@bigpond.com
(08) 8944 1363
NEW SOUTH WALES
Newspaper: Sydney Star Observer
www.ssonet.com.au
SX www.sxnews.com.au
VICTORIA
Newspaper: Bnews/Melbourne Star
www.bnnews.net.au
Melbourne Community Voice (MCV)
www.mcv.net.au
TASMANIA
Information and Support Line
(03) 6234 4242
Freecall 1800 005 900
Working it Out
Hobart (03) 6231 1200
Burnie (03) 6432 3643
Launceston (03) 6334 4013
SOUTH AUSTRALIA
Newspaper: Blaze
www.blazemedia.com.au
QUEENSLAND
Newspaper: Queensland Pride
www.queenslandpride.com.au
Qnews www.qnews.com.au
WESTERN AUSTRALIA
Newspaper: Out in Perth
www.outinperth.com
Website: www.gayinwa.com.au
BI-NSW INC.
admin@bi-ns.org.au
www.bi-ns.org.au
NATIONAL
Newspaper: AX National (AXN)
www.axnational.com
Q Magazine
www.qmagazine.com.au
NEW SOUTH WALES
Newspaper: Sydney Star Observer
www.ssonet.com.au
SX www.sxnews.com.au
VICTORIA
Newspaper: Bnews/Melbourne Star
www.bnnews.net.au
Melbourne Community Voice (MCV)
www.mcv.net.au
SOUTH AUSTRALIA
Newspaper: Blaze
www.blazemedia.com.au
QUEENSLAND
Newspaper: Queensland Pride
www.queenslandpride.com.au
Qnews www.qnews.com.au
WESTERN AUSTRALIA
Newspaper: Out in Perth
www.outinperth.com
Website: www.gayinwa.com.au
BI-NSW INC.
admin@bi-ns.org.au
www.bi-ns.org.au
Glossary

AIDS: A person is said to have acquired immune deficiency syndrome (AIDS) when they have an illness or condition as a result of HIV weakening their immune system. Such illnesses are called opportunistic infections. They are caused by common viruses and bacteria that in most people are controlled by the immune system.

arse play: Sexual acts involving stimulation of the anus and surrounding area, using fingers, hand (fisting) or sex toys.

BDSM: Bondage and discipline and/or sadomasochism; sexual practices or games that involve mock or real infliction of pain or punishment. Also called B&D or S&M.

beat: A public place where men meet for sex, such as some public toilets, certain parks, bushlands and beaches.

bisexual: A person who is attracted to people of both sexes, and/or who has sex with both men and women. Not all bisexuals identify as such; some think of themselves as either heterosexual or gay/lesbian.

blood-borne virus (BBV): Infection such as HIV or hepatitis C that is transmitted by blood-to-blood contact.

bottom: The man who, during anal sex, takes the role of the receptive or ‘passive’ partner – the person being penetrated (fucked).

coming out: The process of letting people know that you are gay or bisexual. See also outing.

cruising: Men looking at each other, flirting with each other and checking each other out, with the intention of having sex. A place can be said to have a ‘cruisy’ atmosphere if there are people checking each other out and picking each other up there.

cum (or come): Common term for semen or ejaculate.

depth throat: The act of taking a penis into the throat in oral sex.

drag queen: A man who dresses up as a woman, usually for the purposes of entertainment. Different from transgender people, in that drag queens are not usually making a permanent change of identity. It is polite to address a drag queen only by their female name when they are dressed up, even if you know them as a male. Lesbians who dress as men are known as ‘drag kings’.

dyke: A lesbian. Regarded by some as an impolite term but favoured by others, as in the phrase ‘butch dyke’.

fisting: Insertion of the hand or forearm in another person’s rectum. A minority practice which requires learning and trust. Some sex-on-premises venues are equipped with slings to support the receptive partner in fisting.

fuck buddies: People who meet to have sex with each other, either regularly or just every now and again, but without making too many other emotional demands on each other.

gay, gay man: A man who is attracted to other men and thinks of himself and/or publicly identifies as gay or homosexual. ‘Gay’ is preferred by many gay men to the term ‘homosexual’. Some people reject the term ‘gay’, seeing it as referring to mostly middle-class and white men. Some same-sex-attracted women describe themselves as ‘gay’, but mostly the term is used to describe men. See also queer, lesbian, GLBTI, and same-sex-attracted.

gay bashers: People, usually young men, who physically attack and sometimes even kill men who they think might be gay. See also homophobia.

gay community: All of the parts of the ‘gay world’ that you can see, spoken of as if put together. For some people, this
might mean just the gay scene, for others it also includes gay clubs, social and sporting groups, businesses, support groups and gay community organisations. It is most visible at community events. Others regard the gay community as a myth.

The term is also used to describe all gay and lesbian or GLBTI people, even those who have no contact with other gay people.

gay scene: The sum of gay venues and events such as Mardi Gras; the visible side of gay lifestyle.

gay venue: A pub or nightclub or any social place of business (e.g. a sex-on-premises venue) or event that mainly caters to gay men or lesbians.

heterosexual: A person who is attracted to and/or has sex (only) with people of the opposite sex. Some heterosexuals have had same-sex experience or been attracted to someone of the same sex but do not regard themselves as gay or bisexual.

HIV: Human immunodeficiency virus (HIV) attacks the immune system, the body’s defence against illnesses. People with HIV are said to be HIV-positive (HIV+), or informally just ‘positive’.

HIV antibodies: Antibodies are part of the body’s natural defence system, which show up when germs or viruses enter the body. HIV antibodies show up in a test between two and eight weeks from when HIV was passed on. These two to eight weeks are called the ‘window period’.

HIV-negative: Someone who has been tested and been found not to have HIV.

HIV-positive: Someone who has been tested and been found to have HIV.

HIV status: Whether or not someone has HIV (e.g. ‘Am I HIV-positive or negative? What’s my status?’).

homophobia: Negative messages and actions against gay men and lesbians, often by men who fear they may themselves be same-sex-attracted. People who hate gay men and act against them all the time can be said to be homophobic. Actions, policies or laws that work against gay men or lesbians can also be described as homophobic. (See also internalised homophobia.)

internalised homophobia: Negative feelings about oneself because of one’s homosexuality held by someone who is gay or lesbian. Internalised homophobia may be the cause for gay men or lesbians to attack or put down other gay men or lesbians for being gay or queer or ‘too gay’.

intersex: Previously known as hermaphroditism, this is a number of biological conditions where a child is born with reproductive organs, genitalia and/or sex chromosomes that are not exclusively male or female. It’s estimated that around one in 4,000 people have intersex conditions at birth.

lesbian: A woman who is attracted to other women and/or has (primarily) female sexual partners. Among friends the more casual term ‘dyke’ is often used.

lubricant, lube: Water-based lubricants such as K-Y jelly, Wet Stuff or Glyde are used on the outside of the condom and in and around the anus during anal sex. They prevent tearing and make it easier to have sex.

Oil-based lubricants include such things as Vaseline, baby oil and hand creams. These weaken the latex of condoms and can cause them to break.

mucous membrane: The thin tissue lining the nose, eyes and certain other areas such as the eye of the penis and the rectum. These delicate tissues are easy entry points for HIV.

non-scene: A way of describing a gay man who does not go out to clubs, nightclubs or other places associated with the visible part of the gay scene.
outing: The process of revealing that someone is gay without his or her consent.

PLWHA: Person or people living with HIV or AIDS.

pre-cum (or pre-come): Colloquial term for pre-ejaculate, the clear fluid that emerges from the tip of the penis when the penis is erect, but before orgasm.

rimming: Stimulating the anus with the tongue.

safe sex: Sex in which HIV will not be passed on from one person to another. Remember, safe sex won’t always stop other STIs from being passed on.

same-sex-attracted: Attracted to someone of his or her own sex. Includes gay people and also those who do not identify as gay but who have, or would like to have, sex with others of their own gender. The term ‘same-sex-attracted young people’ is sometimes shortened to SSAY.

semen: Ejaculate; the fluid released from the penis at orgasm. Contains sperm (spermatozoa). Colloquially called cum or come.

sex toys: Vibrators, dildos and other toys used in sex play and often inserted into the anus.

STIs: Sexually transmissible infections. A broad term that includes viruses (e.g. HIV, herpes, wart virus), bacteria (e.g. chlamydia, gonorrhoea, syphilis) and parasites (e.g. crabs, scabies) that are transmitted through close body contact, usually sexual. Sometimes referred to as STDs (sexually transmitted diseases).

straight: Heterosexual; sexually attracted to and/or having sex with people of the other sex. Confusingly, ‘straight’ can also be used to describe someone who isn’t drunk or on drugs (e.g. ‘No, I swear to you, I was straight at the time, I hadn’t touched a drop!’).

top: The man who, in anal sex, takes the role of the insertive or ‘active’ partner – the person penetrating (fucking) the other with his penis.

transgender, transsexual: A person who identifies as being of a gender other than that they were born with. For a transgender man, becoming a woman is very important; it feels like their true self. It may or may not involve having sex-change surgery. Those who intend to have the surgery but have not yet done so are known as ‘pre-operative’ or ‘pre-op’ transgender people. You may also hear the terms MTF (male-to-female) or FTM (female-to-male) used. Among friends, the more casual ‘trannie’ or ‘trannies’ is sometimes acceptable. ‘Transgender’ or ‘trannie’ (but not ‘transsexual’) can also be used of someone who rejects society’s insistence that each person be either male or female. (Note that a transgender person is not the same as a cross-dresser.)

urethra: The tube through which urine and semen pass through the penis. The ‘eye’ or hole in the tip of the penis is called the urethral meatus.

versatile: A person who, in anal sex, practices the role of either top or bottom and enjoys both roles.

viral load: Viral load is the measurement of the amount of a virus such as HIV in a person’s blood. When a person is first infected with HIV, the amount of virus in their body is extremely high (they have a high viral load) and they are more likely to pass the virus on to others. Viral load fluctuates throughout the course of infection and varies among different people.

When a person’s viral load is very low it may be said to be ‘undetectable’. This does not mean that the virus has gone away, only that, at the time of the test, it was below the level that current tests can measure.
This guide is produced by the Australian Federation of AIDS Organisations.

PO Box 54, Newtown, NSW 2042
Email: afao@afao.org.au
Tel: (02) 9557 9399
www.afao.org.au

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