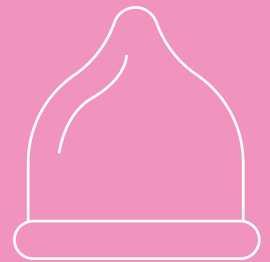


SHIFT

SEXUAL HEALTH INFORMATION FOR TEENS

YOUR GUIDE TO:

Sexual health, relationships, puberty
and everything in between!





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This booklet was produced by the Sexual Health Centre in Cork - if you have any queries or comments about the topics in the following pages, you can contact us directly. We would love to hear from you!



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The Sexual Health Centre - Cork



www.sexualhealthcentre.com



@besexystayhealthy



021 427 6676



16 Peters Street, Cork City

The Sexual Health Centre's FREE services include:

- Telephone helpline and web chat.
- Drop-in advice service.
- Condoms and demonstrations.
- Pregnancy testing.
- Pregnancy counselling and support.
- Peer-led LGBTI+ Support.
- Sexual health education workshops.
- Teacher and youth worker support.
- Rapid HIV testing.
- HIV counselling and support.



If you live outside of Cork, contact the Sexual Health Centre for information about services in your area.

Author: Teahan O.

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INTRODUCTION

Sexual health is an integral aspect of everyone's life, yet many sources of information regarding sexual health are outdated, biased or factually incorrect. The Sexual Health Centre created this booklet to offer you guidance on the changes and challenges that you may be facing.

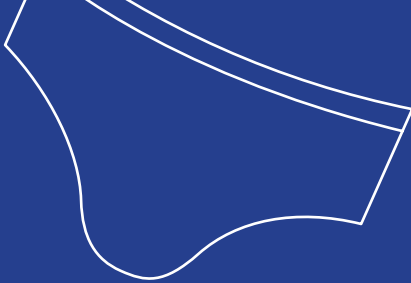
Discussing relationships, sexuality or puberty can sometimes make people feel uncomfortable or confused. It is important that you have non-biased information about your sexual health and relationships so that we can shift the conversation away from shame and judgement, and towards openness and acceptance.

You deserve to feel good about yourself, and to be supported and informed about your own body, sexuality, identity and health. Our motto at the Sexual Health Centre is "No bias. No judgement. No exception.", meaning that we are here to fully support every person's sexual health and wellbeing, without exception!

This resource will guide you through some of the issues that you may need to consider during your teenage years, such as body changes, relationships, consent, contraception, sexual activities, pregnancy, Sexually Transmitted Infections, HIV and other influences on your health.

If you have any questions or concerns about any of the topics that come up in this booklet, you can contact the Sexual Health Centre (details on page 4) or drop into us at 16 Peters Street in Cork city!

PUBERTY



Puberty is the time when your body might slowly start to change. The body produces hormones to make it ready for sexual development. Your emotional patterns might also change. Puberty happens to people at different times. There is no standard timeline for these changes to happen for you. It will happen when your body is ready. People are usually 'assigned male at birth' (AMAB) or 'assigned female at birth' (AFAB) based on their sex organs; they are usually called a girl if they have female sex organs or called a boy if they have male sex organs. However, not everyone identifies with the gender (i.e. girl or boy) given to them at birth.



Girls and people who were assigned female at birth (AFAB) may experience some or all of the following changes:

- Breasts and nipples get bigger
- Waist narrows
- Hips widen
- Ovaries, womb and vulva get bigger
- Periods begin
- The vagina gets a bit bigger and produces more fluid (discharge)
- Skin may get greasy

Boys and people who were assigned male at birth (AMAB) may experience some or all of the following changes:

- Shoulders broaden
- Facial hair/ body hair
- Voice deepens (breaks)
- Penis gets longer and wider
- Testes (Testicles) get bigger
- Sperm develops in the testicles



Most people experience some or all of the following changes:

- Underarm and pubic hair
- Body odour
- Spots/acne
- Mood changes
- Growing pains
- Emotional changes
- Sexual attraction

Intersex people have variations of sexual characteristics. This means that some people's bodies do not fit neatly into our ideas of typically male or typically female. There is a wide range of variations of sexual variations that can occur – for example, an intersex person may appear male externally but have female anatomy on the inside or appear female externally but have male anatomy on the inside. This is sometimes called a 'blending' of male and female traits. Sometimes there is no external indication that a person is intersex, because their 'blending' is at DNA level. When children are born, they are usually assigned a gender, based on their genitals. In the past when a child was intersex, a Doctor may have made the decision to perform surgery in order to assign a sex and gender to the child. This has led to emotional distress for many intersex people who feel that their bodily autonomy was taken from them. For this reason, there is a move towards not taking any surgical action until a person is of an age that they can decide what to do for themselves.



Some people do not identify with the gender (i.e. girl or boy) given to them at birth. For example, someone who was assigned female at birth could have an internal sense of identity that matches a boy and be transgender. This is different from someone whose gender identity matches their sex, even if that person's behaviour does not match gender stereotypes i.e. a person who was assigned female at birth, who does not express themselves in a stereotypically feminine way, is a girl unless they internally identify otherwise.

OTHER THINGS TO KNOW...

You might feel that you do not know enough about puberty, sex, and other changes; but everyone has gaps in their knowledge - including adults and especially anyone who says that they know it all!

Dealing with body changes can be challenging. The Sexual Health Centre's helpline and webchat is available, free of charge, if you would like non-judgemental advice or just a chat.

MALE BODY CHANGES

HAVING A LOOK AT YOUR BODY

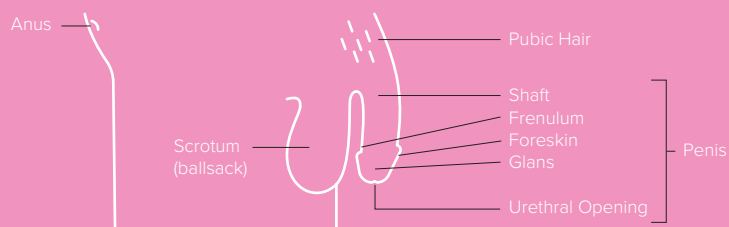
The male sex organs are usually visible from the front of the body. The male sex organs usually include the penis and the two testes (often called balls) which are held in the skin sacs called the scrotum.

The penis hangs outside the body. The head (called the glans in medicine) is where both urine and semen come out. The glans and the rim (raised ridge of the penis) are very sensitive to touch. There are many different sizes, shapes and colours of penises. None of this makes a difference to sexual satisfaction.

Foreskin is the loose fitting skin which can be pulled back and covers the glans (head) of the penis. It is important to keep the area under the foreskin clean. You can do this by gently pulling back the foreskin and washing it well when you are in the shower or bath. If this causes pain, it may mean that the foreskin is too tight – some people may need a circumcision. Circumcision is a simple procedure that separates the foreskin from the glans. This can be done for cultural or medical reasons.

The **scrotum** is a sac of skin under the penis which holds the testes. The skin is wrinkly so it can tighten and contract. This is perfectly normal.

The **testes** produce sperm and the male sex hormones. The testes move closer to the body during sexual arousal and when they are cold so that the temperature is kept at the correct level for the production of sperm.



OTHER THINGS TO KNOW...

- The urethra is a tube through the penis where urine and semen come out of the body (but not at the same time).
- An erection happens when the penis fills with blood. The penis becomes hard and erect (upright). During adolescence, erections can happen at any time. This is perfectly normal. If you want your erection to go down, try thinking about something else.
- Ejaculation is when semen spurts out of the penis at orgasm. Semen (cum) is the fluid that is ejaculated from the penis. Although the sperm that is ejaculated could fit on the tip of a pin, there are about 300 million of them in each ejaculation. It just takes one of these to fertilise the egg and lead to pregnancy.
- Precum is the name given to the fluid that comes out of the penis during sexual arousal before ejaculation. Some people think that if the penis is withdrawn before ejaculation that pregnancy can not occur. This is not true as precum carries sperm in it. Sexually Transmitted Infections can also be passed through precum.
- Some young people have Wet Dreams. This is when semen is ejaculated while they are asleep. It's a perfectly normal part of development.
- Pubic hair usually grows in the pubic area. You may have a lot of hair or not very much. We are all different. Some people trim, wax or shave their pubic hair, but that is up to the individual. Do not feel pressured to do this by anybody else.
- We all have our natural body scents. To keep your body smelling pleasant you will need to wash regularly, particularly once puberty starts.
- If you are worried about your body changes, and would like to talk to someone about it, you can contact the Sexual Health Centre on social media, by phone or email.

FEMALE BODY CHANGES

PERIODS



One of the changes that puberty brings is periods. Once periods start, it means that your body is preparing for potentially becoming pregnant some day.

- When periods start, they might not come every month at first. This is perfectly normal.
- The blood that comes out of the vagina might be brownish for the first few times.
- Although it might look like a lot of blood, it is usually no more than a full egg cup.
- Your period might start unexpectedly so it might be a good idea to start carrying tampons or sanitary pads with you. If you don't have sanitary products with you just let someone know. This could be your teacher, youth worker or another adult who can help you.
- Periods usually last 3 to 7 days.
- You may get period pains, lower back pain or cramps just before or during the period. Some people have mild pains, while others have very painful periods. Heat on the lower stomach, such as heat patches or a hot water bottle wrapped in a towel, can help with cramps and pain.
- Dysmenorrhoea (dis-men-or-e-a) is the medical word for painful periods. If your period is very painful or heavy, you might want medical advice on how to make it more manageable. You can contact your GP or the Sexual Health Centre for more information.



Pre-menstrual Syndrome (PMS) is when someone has a range of physical and emotional changes just before their period begins. It is usually caused by hormonal changes in the body. Some people get very bad PMS while others just feel a bit uncomfortable. PMS is also known as Pre-menstrual Tension (PMT).



Primary amenorrhea occurs when a girl or person assigned female at birth does not get their first period by the age of 14 (if they have also not developed secondary sexual characteristics) or does not get their first period by the age of 16 (if they have already started developing secondary sexual characteristics). If this occurs, it is important to speak to a doctor about it. It is a common way for people who are assigned female at birth to discover that they have intersex variations.

MENSTRUAL CYCLE

The time it takes from the first day of your period to just before your next period is called the menstrual cycle. Your cycle can be anything from 21 to 42 days, but medical professionals tend to take 28 days as the average. The days below are merely an example of an average cycle.

- Day one of your period is the first day of your cycle.
- Days 6-11, the lining of the womb gets thicker so that the fertilised egg can grow.
- Days 11-16, ovulation, when the egg is released from the ovary in which it is stored. This is your most fertile stage which means you may be more likely to become pregnant if you have sex. This period is calculated from the first day of your last period.
- Days 17-28, if you are not pregnant, the lining of the womb comes away, causing your period. The blood comes out through your vagina.
- If your menstrual cycle is longer than 28 days, ovulation takes place around 12 to 16 days before the beginning of your next period.

OTHER THINGS TO KNOW...

- Breasts become larger (size varies) and more sensitive. The area around the nipple may become wider and darken in colour.
- Pubic hair usually grows in the pubic area. You may have a lot of hair or not very much. We are all different. Some people trim, wax or shave their pubic hair, but that is up to the individual. Do not feel pressured to do this by anybody else.
- We all have our natural body scents. To keep your body smelling pleasant you will need to wash regularly, particularly once puberty starts.
- If you are worried about your body changes, and would like to talk to someone about it, you can contact the Sexual Health Centre on social media, by phone or email.



HAVING A LOOK AT YOUR BODY

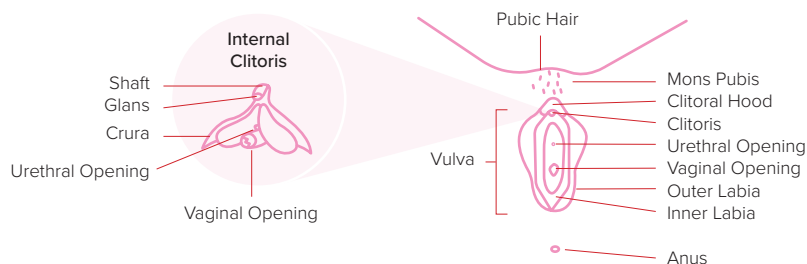
By examining your own body, you can learn to understand it. Understanding your body is an important part of accepting yourself fully. If you decide to start any kind of sexual relationship with another person, it is important that you understand your own body.

The vulva is the name for the female genitals which are outside the body. People often (incorrectly) refer to it as the vagina (which is internal, not external). The parts of the vulva vary in size, shape and colour for each person. Your vulva lies between your legs and is therefore not as visible as a penis. To see your genitals you can sit or stand with your legs apart with a mirror facing your genitals.

Labia: The two labia (lips) help protect the genital area. When you are sexually aroused, they make a discharge that softens and moistens the vagina. They can be very sensitive during sex. The labia vary in size and shape for each person.

The clitoris (from the Greek word for key) is the most sensitive part of the vulva. It gets bigger during sexual arousal and helps produce an orgasm. The clitoris is a little bundle of nerve endings and is there purely for pleasure.

The vagina is an opening which can stretch. If you are having sex or masturbating, you may choose for your vagina to be penetrated by fingers, or another person's genitals. The vagina is where blood comes out during a period. The opening to the urethra is just in front of the vagina and this is where urine comes out. The vagina has natural bacteria to keep it healthy; this creates a discharge which is normal. Using perfumed soaps or shower gels to wash the vagina may cause thrush, an itchy yeast infection, so try to avoid using these products. It is recommended that just water or "pH-balanced" products designed for vaginal washing are used.



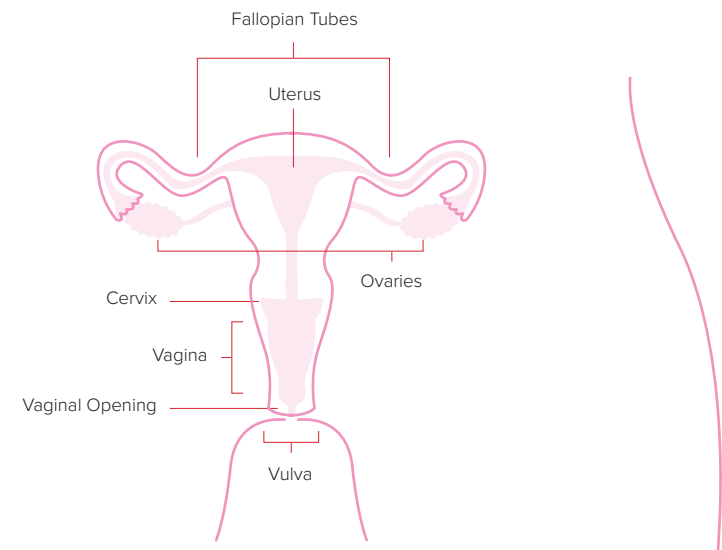
INSIDE BITS

The G-spot: Some people say they have none and others believe there are many. G-spots may be found (not easily) along the wall of the vagina. Some people find it very exciting when their G-spot is touched. Others do not find it particularly exciting at all. We are all different.

The cervix is the lower part of the uterus and you can usually feel it by putting your fingers up to the top of the vagina where it feels soft and smooth to the touch. If a person gives birth, their cervix gets wider during the birth to make way for the baby.

The hymen is a thin membrane inside and near the vaginal opening. If it has not already been broken by either physical activity or tampon use, you might experience some slight spotting the first time you have sex.

The uterus (womb) usually lies at the top of the vagina. It is pear shaped and about the size of a clenched fist with muscular walls. It has an inner lining that thickens each month so that it can receive an egg, if it is fertilised. This is where a baby develops and grows for 9 months.



HEALTHY RELATIONSHIPS

Every person has an emotional range. It is normal to feel low and negative at times. It is important to recognise your own emotional reactions. When times are hard, a common and natural reaction is to become increasingly judgmental and critical of yourself and others. It is good to be aware of your thoughts and feelings, and learn to express them.



Your relationship with yourself is the most consistent relationship in your life, and it impacts all of your other relationships. A healthy relationship with yourself will help you to recognise if you are forming unhealthy habits in your relationships with others. It is important to recognise whether a relationship is healthy or unhealthy, as this will help you to learn and move on from relationships that are negatively affecting you.



“Self-esteem is what we think and feel and believe about ourselves. Self-worth is recognising ‘I am greater than all of those things.’ It is a deep knowing that I am of value, that I am loveable, necessary to this life, and of incomprehensible worth.” - Dr. Christina Hibbert, 2013.



If you ever feel depressed or even suicidal and think the world would be better without you, THIS IS NOT TRUE. You deserve to live your life as your true self, and there are people who can help you to remember that. Try to talk to someone you know and trust, and/or contact the Samaritans at **116 123** which is a free call number.

In order to maintain healthy relationships (including with friends, people at work etc.), we need to be aware of, and understand, our emotions. Dialectical Behavioural Therapy (DBT) is one tool that can be useful for any person, in any type of relationship. The following acronyms containing letters for various skills may be useful for you:

FAST - for self-reflecting

Fair - Be fair to yourself and to the other person.

(N) Apologies - No apologies if you are not in the wrong e.g. for making a request, having an opinion, disagreeing, etc.

Stick - Stick to your own values. Be clear on what you believe is the moral way to act.

Truthful - Don't lie, exaggerate or make excuses.

DEAR MAN - for asserting yourself (expressing yourself confidently)

Describe the current situation.

Express your feelings and opinions about the situation; Use “I” statements e.g. I feel..

Assert yourself by asking for what you want, or saying “No.” clearly.

Reinforce or reward the person ahead of time: explain consequences.

Mindfully keep your focus on your objectives: don't be distracted.

Appear confident and effective: good eye contact, no stammering.

Negotiate - be willing to give to get.

GIVE - for building intimacy and understanding

Gentle - Be polite in your approach; no attacks, threats or judging.

Interested - Listen; be interested in the other person.

Validate - Validate the other person's feelings about the situation.

Easy manner - Use an easy-going approach; smile.





HEALTHY ROMANTIC RELATIONSHIPS

You might not have any examples in your life of healthy romantic relationships that you can relate to or look up to - particularly if you identify as LGBTI+. Not having any examples or 'role models' of a healthy relationship in real life can make it harder to recognise the signs of healthy and unhealthy relationships. You can always ask for support or advice at the Sexual Health Centre. If you do experience unhealthy relationships and make mistakes, it can be upsetting and confusing. Thankfully the pain that can come from unhealthy relationships does not have to last forever because you can learn from it, and use it to figure out what worked and what didn't work and how you might change your boundaries, behaviour or standards. No regrets - just learning moments!

THERE IS NO STANDARD DATING TIMELINE

If you don't feel any romantic interest in anyone, and/or if you don't receive any romantic interest from others, it can feel like it will never happen. This can be especially disappointing if your friends are starting to spend time with other people romantically. Don't be hard on yourself if you're not doing the same things as your friends. This is no indication at all of what the rest of your life will look like and the kind of connections you will have with people in the future. Also, don't feel pressure to care about relationships and dating if it's not a priority for you! What's important right now is that you can figure out what would/does make you feel good, and don't lower your standards just because you may not have it yet.



If you do not have any person in your life who you can trust and ask for advice, you can contact the Sexual Health Centre about any concerns you have. If we do not provide the support or service that you need, we can advise you on another organisation that can support you.

KNOWING WHAT YOU WANT

Some people who rush into sexual activity or don't make their own choices often feel hurt and confused afterwards. Having unplanned sex also means that you may risk pregnancy and/or Sexually Transmitted Infections (STIs), even if it's your first time participating in any sexual activity.

Some people get caught up in behaviour that they do not really enjoy or want but continue doing it just because it's what is familiar i.e., they have never tried to behave a different way, or don't believe that they can behave differently. Masturbation can be a useful way to explore what excites your body – you can read more about masturbation under the 'Sexual Activities' section.

If you start your sexual life in a way that you are not comfortable or happy about afterwards, you can change your behaviour. You can say no at any stage in a relationship or interaction, if that is what you want. You are more likely to enjoy your sexual experiences if you wait until you feel ready and you want it for yourself, not to please other people.

If you decide not to have sex, that is absolutely okay and you should not let others pressure you. People sometimes say that "everyone is doing it", but that is not true.



CONSENT



WHAT IS CONSENT?

Consent is an agreement to participate in a specific activity or action. It cannot be forced. It must be **mutual, voluntary, enthusiastic** and **ongoing agreement**.

- **Mutual** - because every person that is involved must give consent.
- **Voluntary** - because it's not consent if someone is pressured in to agreeing.
- **Enthusiastic** - because it is important that every person that is involved actually wants to be involved, and is not just going along with it for others' benefit.
- **Ongoing** - because you need to give and receive consent before and during each and every act.

WHEN IS CONSENT NEEDED?

- Consent is crucial for any physical or sexual interaction, including something as simple as holding someone's hand.
- In the context of sex, consent means a mutual, voluntary, enthusiastic agreement between people to participate in any specific sexual activity. It must be given freely and cannot be forced.
- Sexual contact without consent means that someone is abusing, assaulting and/or raping another person.
- It is important that consent is ongoing i.e. before any and every sexual act. Just because someone has agreed to one thing does not mean that they agree to anything else! For example, if two people have consented to kissing each other, that does not count as consent for fondling each other's bodies.



Consent is needed for every specific activity. This applies to sexual activity in real life as well as online and messaging.



Sexual abuse includes any non-consensual sexual acts. For example, forcing, tricking or guilting someone in to participating in a sexual activity is abusive.

CAN ANYONE GIVE CONSENT?

No - some people are not capable of giving consent according to Irish law. If they say 'yes' to any sexual interaction, it does not count as consent. This includes:

- If you are not clear minded e.g., drunk to the point of incapacity.
- If you are under the age of 17.
- If you are incapable of understanding the nature or consequences of the sexual act, or incapable of communicating consent, due to a mental or intellectual disability or mental illness.



Some people with mental or intellectual disabilities or mental illnesses are capable of giving consent, while others are not. It depends on the type and extent of the disability or illness.



If someone has been drinking alcohol or consuming other drugs, it is much more difficult to give your consent and to receive another person's consent. No sexual activity should occur if there is ever any mixed messages, doubt or confusion.



Child sexual abuse is when a child is used by another person for their sexual arousal or for that of others. If you are worried about sexual abuse, please contact a rape crisis or sexual violence centre which supports people who have been sexually assaulted or abused.



WHO NEEDS TO GIVE AND RECEIVE CONSENT?

- Everyone involved in a physical or sexual interaction.
- Before any physical or sexual contact with another person, it is essential that you have already received their consent and you have already given them your consent.

RECOGNISING CONSENT

- The absence of 'NO' does not mean 'yes' - if it is not clear, it is not consent.
- People have the right to change their mind or withdraw consent any time.
- No circumstance will ever give you ownership of another person's body. For example, being in a relationship does not give you any ownership or control of another person. Sexual contact without consent is abuse, assault and/or rape.
- Nobody is ever entitled to a sexual experience or physical contact with you. It is a joint, voluntary decision.
- It is important to understand your desires and limits (what you're comfortable with), and become comfortable communicating those to your sexual partner(s).
- It is vital that any sexual experience is for the enjoyment of every person involved - if someone no longer wants to do it, there is no consent.
- You have to consistently communicate with the other person. Even if both of you agreed to a sexual activity, someone could change their mind or become uncomfortable. This is totally normal.
- Any sexual communication online or by phone requires consent e.g. sexting.

- It is okay if you have questions about how to give and receive consent. Giving and receiving consent is something that you need to become comfortable with and informed about **before** you take part in sexual activity with others. If you would like advice regarding how to communicate consent with a potential sexual partner, you can contact the Sexual Health Centre for support and information.

MISINFORMATION ABOUT CONSENT AND ASSAULT

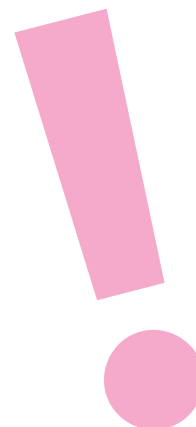
Many people in Ireland are misinformed about why assault happens. The Eurobarometer survey showed that:

- Almost 1 in 10 Irish respondents believed that if you voluntarily go home with someone or wear revealing, "provocative" or "sexy" clothing, this could justify non-consensual sexual activity.
- Almost 1 in 4 Irish respondents believed that women are more likely to be raped by a stranger than someone they know.

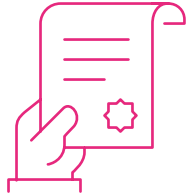
These are misinformed, harmful beliefs, based on prejudice, a lack of understanding, and a judgemental victim-blaming mentality.

The behaviour and clothing of an assault victim is completely irrelevant. The idea that clothing could be "provocative" is incorrect, and it takes responsibility away from the person who is abusing and puts the blame on the person who is being abused. Sexual assault and abuse is never the victim's fault.

Many studies have proven that sexual offences are usually committed by somebody that the victim already knows.



RECENT HISTORY OF CONSENT AND IRISH LAW

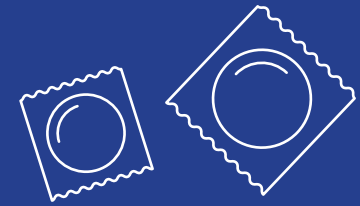


Ireland has a very negative history regarding consent and the right to control what happens to your own body. This is interlinked with the history of shame in Irish society about sexuality and sexual health, and the historical, institutional abuse of the sexual health rights of women and sexual minorities.

- Until 1990, Irish law said that a man could not be found guilty of rape if the person being abused was his wife. This meant that women in Ireland were not legally protected from assault, and men were protected by law if they assaulted their wives.
- Until 2017, Irish law did not have any clear statement to define what counted as consent to a sexual activity.
- This lack of clarity has made it extremely difficult to prove a lack of consent in sexual offence court trials.
- Many people who suffer rape and other sexual assaults are reluctant to report the crime because they do not trust the legal system, and because of the judgement in Irish society towards people who report sexual assault.



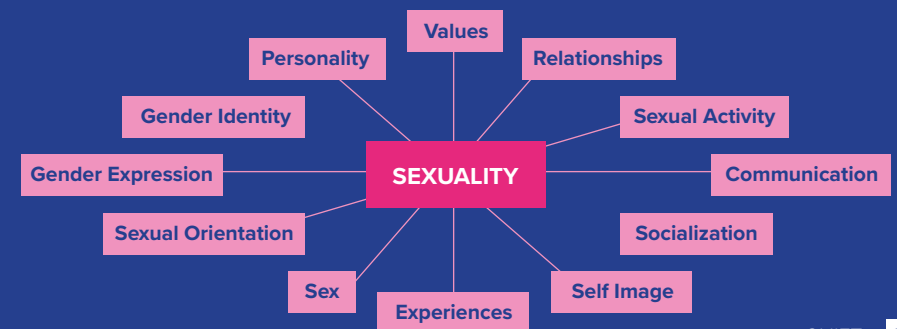
SEXUAL RELATIONSHIPS



The age of consent for sexual intercourse in Ireland is 17. After puberty you may experience new sexual thoughts and feelings. You may begin to feel sexually attracted to people of the opposite sex, same sex or both. You may become curious about sex and start experimenting when you feel you are ready and prepared. Being sexually healthy requires having a positive, informed and respectful approach to your own (and other people's) sexuality and needs.

SEXUALITY

Sexuality is a fundamental part of being human. It means much more than sex and sexual intercourse. It is what drives us to develop relationships where we can be sensual, loving and intimate. It influences our thoughts, emotions and behaviours. Our feelings about sexuality are an important influence on our sexual health. The Sexuality Wheel (created by Alberta Health Services) below shows how much sexuality is intertwined with other parts of ourselves and our lives. Each part of the wheel represents a part of who we are, and shows how these parts are all connected. The boxes on the left side of the wheel show who we are by nature, while the ones on the right show who we are taught or who we learn to be. When all parts of the wheel are healthy, our sexuality is healthy.





SEXUAL ORIENTATION

Sexual orientation refers to who we feel attracted to. Heterosexual people (straight) are attracted to people of the opposite sex or gender; homosexual people (gay or lesbian) are attracted to people of the same sex or gender; bisexual people are attracted to people of both sexes or genders. Pansexual people are attracted to people regardless of their sex or gender.



It may be difficult to be open about your sexual feelings. “Coming out” is a process of accepting yourself and deciding when to share your orientation with others. This process can be daunting, exciting and confusing and you may feel isolated from others at times. What is important is that you know you are not alone. There are many people who have gone through what you are going through. If you need advice, or if you just want to talk to someone about how you are feeling, you can contact the Sexual Health Centre or one of the other organisations listed at the end of this booklet.

VIRGINITY

Virginity is an idea (or lots of different ideas). It is not a medical concept. What you consider to be virginity is usually influenced by your cultural background and religious upbringing, so virginity means different things to different people. There is a lot of false information regarding what virginity is, and who is or is not a virgin. For example, some think that people are virgins unless they have had sex involving a penis inserted into a vagina, but this way of thinking excludes lots of different sexual activities. It is also a heteronormative view of sex i.e., this way of thinking often excludes or ignores people who are not heterosexual. The concept of virginity has also been used to judge women and people assigned female at birth, and label them as ‘pure’, ‘prudish’, ‘respectable’, ‘unworthy of respect’ etc. This is a very harmful, incorrect and sexist viewpoint. Being sexually active or not sexually active is not an indicator of whether someone is worthy of respect. The concept of ‘virginity’ is outdated and irrelevant in many ways. What matters is that you feel comfortable and informed about your sexuality and the decisions you make regarding sexual activity (i.e. doing or not doing what ever is right for you).

Some girls, women and people assigned female at birth become concerned about their hymen breaking, and its connection to virginity. However, the hymen may be broken as a result of lots of day-to-day activities. It has nothing to do with ‘proving’ your virginity.

HOW DO YOU WANT TO START YOUR SEXUAL LIFE?

It might seem weird but this is an important question. Many people may just have sex with someone because they don’t want to say no or be left out. You do not need to prove anything to anyone regarding your sexuality, or sex life. Prioritise becoming comfortable with your own body and sexuality first. If you feel ready, comfortable, safe and excited to share a sexual experience with others, you will be much more likely to enjoy the experience. There is no rush!

SEX IS MUCH MORE THAN SEXUAL INTERCOURSE

While there is no set pattern to good sexual relationships, you can have fun, be safe and learn useful skills by not rushing into physical sexual activity. Flirting, chatting up, hanging out, dating, breaking up, touching, holding hands, kissing, talking, fondling outside clothes, fondling under clothes, stimulating of genitals etc. are all part of developing sexual relationships. It is also important to remember that **sexual activity is an experience, not a performance!** It can be a lovely, fun and exciting experience to share with someone, and you do not ever need to ‘act’ as though you are enjoying it if you would prefer to stop or just go slow.

SEXUAL RELATIONSHIPS AND DISABILITY

In its definition of sexual health, the World Health Organisation states that "...the sexual rights of all persons must be respected, protected and fulfilled." This includes people with disabilities, but unfortunately these rights can sometimes be overlooked. If you have a disability, you might find that these needs, thoughts, and feelings are often not recognised, even by people who really care for you. This may be very frustrating. A person with a physical disability may find it difficult to engage in sexual activity. This may also lead to frustration or sadness. However, it is important to know that there is more to intimate relationships than sexual intercourse. Sensuality and companionship are also very important and fulfilling parts of being in a romantic relationship. Some people with disabilities find that their disabilities do not interfere with forming and maintaining romantic relationships. People who are experiencing difficulties finding a sexual and/or romantic partner may often feel very lonely. It is important to understand that the most important relationship is the one you have with yourself. Doing things that make you happy and having your own interests may make you more attractive to other people. If you are living with learning or physical disabilities, you demonstrate great resilience in overcoming significant challenges every day. This in itself is a very attractive trait. Fortunately, Ireland is slowly changing, to ensure that there is less prejudice against people with disabilities and greater recognition and application of those rights for people with disabilities.



CONTRACEPTION

Contraception is used to prevent transmission of Sexually Transmitted Infections and unwanted pregnancy. Contraception is often discussed in a heteronormative way - i.e. people who are not heterosexual are often not included in conversations about contraception. This is due to misinformation and a lack of understanding. Whatever your sexual orientation or gender, if you are sexually active, you are at risk of contracting a Sexually Transmitted Infection (STI). Hormonal contraception works by stopping the female eggs from being released from the ovaries. It is important to weigh up the advantages and disadvantages of each method and find one that meets your particular needs. You can go to your GP or contact the Sexual Health Centre for more information on contraception. Please note that some GPs may require that a guardian is informed before prescribing contraception to people under the age of 17.

BARRIER CONTRACEPTION

Condoms



These work by stopping the male sperm from reaching a female egg and preventing fertilisation.

They are considered to be 98% effective against pregnancy when properly used. (See our condom checklist).



Dental Dam

This is a sheet of latex that is used to cover the vulva during oral sex. A dental dam protects against Sexually Transmitted Infections. Dental dams are often more expensive to purchase compared to condoms. By cutting a condom open, you can use it as a dental dam. At the end of this section, you can see how to make your own dental dam by cutting up a condom.



The Diaphragm (the cap)

The diaphragm is a dome of thick rubber which fits inside the vagina over the cervix. It acts as a barrier to stop the sperm reaching an egg. It must be inserted prior to sex and left in for a number of hours after sex. The diaphragm must be used in conjunction with spermicidal gel.

It must be specially fitted for each individual person.

The diaphragm does not provide protection against Sexually Transmitted Infections.



Withdrawal (pulling out) is not a form of contraception. Some people think that if you have sexual intercourse and withdraw the penis from the vagina before ejaculation, that there is no risk. This is not true as fluid containing sperm (precum) comes out of the top of the penis when it is erect and this can cause pregnancy and STIs.

Contraception methods for boys, men and people assigned male at birth (AMAB) are limited to condoms and vasectomy operations. While potential hormonal contraception methods have been studied since the 1970s, none are yet commercially available and it's likely that we won't see a commercially available product yet for many years.



CONDOM CHECKLIST

- ✓ Always check the date on the packet and never use any condom that is passed its 'use by' date.
- ✓ Make sure that the condom you are using has a safety mark e.g. 'CE'.
- ✓ Keep your condoms away from heat, light and damp as these can damage them. Wallets and pockets can expose a condom to heat and friction so they are not good places to store your condoms.
- ✓ Open the packet carefully and watch out for nails, jewellery etc. as they can tear a condom easily.
- ✓ Wait for the penis to go hard. With one hand, squeeze the tip of the condom with your thumb and finger to get rid of all of the air at the tip. Put the condom on the penis with the other hand and roll it all the way down. Be sure to put it on with the roll on the outside.
- ✓ If you need lubricant (to add wetness) make sure it is a water-based lubricant. Never use anything that is oil based such as Vaseline, baby oil etc. as these will rot the condom very quickly so it will not protect you.
- ✓ Withdraw the penis straightaway after ejaculation.
- ✓ Hold the condom firmly at the base of the penis to stop any leaks.
- ✓ Knot the base of the condom, check for any tears, wrap it in a tissue and throw it in the bin.
- ✓ Do not throw it down the toilet, as condoms won't flush!
- ✓ Always only use one condom at a time and do not re-use.
- ✓ If you've never used a condom before, practice by yourself first.

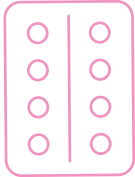
For more information on how to use condoms and lubricant, check the link below: www.sexualhealthcentre.com/relationships-and-sex



HORMONAL CONTRACEPTION

Hormonal contraception is prescribed by a doctor for girls, women, and people assigned female at birth.

The pill



The pill works by stopping eggs being released from the ovaries.

It must always be taken as prescribed and never shared with friends even if they are on the pill also.

If taken correctly (every day) the pill is considered to be 99% effective against pregnancy.

If you have been vomiting or you forget to take the pill you may not be protected. It is important to always use a condom for 7-10 days afterwards.

The pill does not provide any protection against Sexually Transmitted Infections.

The patch



Patches are thin, beige and about the size of a matchbox.

They work by releasing hormones through the skin which stop the eggs from being released from the ovaries.

They can be applied to various parts of the body but should not be put on the breasts or anywhere above the neck.

They are used for three of the four weeks of the cycle and are changed weekly.

Patches do not provide protection against Sexually Transmitted Infections.

Implants (also known as the bar)



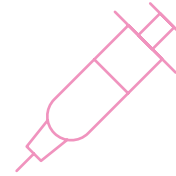
These are flexible tubes containing a hormone.

They prevent ovulation and are a long term contraceptive, lasting up to 3 years.

They are placed under the skin on the inside of the arm by a doctor.

Implants do not provide protection against Sexually Transmitted Infections.

Contraceptive injections

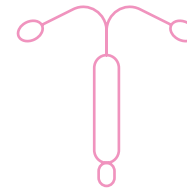


These injections slowly release the hormone progestogen. They work by stopping ovulation and prevent fertilisation.

Each injection lasts for 8-12 weeks.

Contraceptive injections do not provide protection against Sexually Transmitted Infections.

The Intrauterine Device (IUD) (also known as the coil)



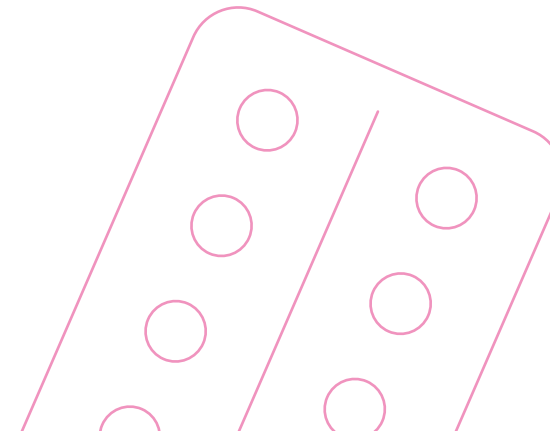
The IUD (or coil) is a small piece of plastic and copper placed inside the womb by a doctor.

The Mirena and JayDez IUDs are plastic and contain hormones.

This method is normally prescribed to people who have already experienced a pregnancy.

It lasts for 3-10 years.

The IUD does not provide protection against Sexually Transmitted Infections.





Emergency contraception (also known as the morning after pill)

This can be used if you had sex without contraception or if you think your contraception may not have worked.

Emergency contraception is a high dose of hormone which can stop ovulation and /or makes the womb shed its lining to prevent fertilisation. There are two types of emergency contraception pills that are available from pharmacies and GPs.

- Progesterone (must be taken within 72 hours /3 days).
- Ulipristal (must be taken within 120 hours /5 days).

The earlier emergency contraception is taken (within 24 hours), the more effective it will be.

You can buy either type of pill in a pharmacy without a prescription. The pharmacist will ask you some questions to check that you are not on any other medications that will make the morning after pill less effective and to make sure that it is safe for you to take it.

Emergency contraception is not a substitute for regular contraception - it should be used only as an emergency solution.

Emergency contraception does not provide any protection from Sexually Transmitted Infections



Hormonal contraception is not suitable for some people, including people with high blood pressure, as it can increase the risk of forming blood clots. For this reason, a doctor should take your blood pressure and ask about your medical history before prescribing any contraceptives.



Each type of hormonal contraception has its own set of side effects and risks. These side effects might be severe in some people and non-existent in others. If you are using hormonal contraception and feel unwell (physically, mentally, emotionally or sexually), do not suffer in silence! Discuss other contraceptive options with your GP.



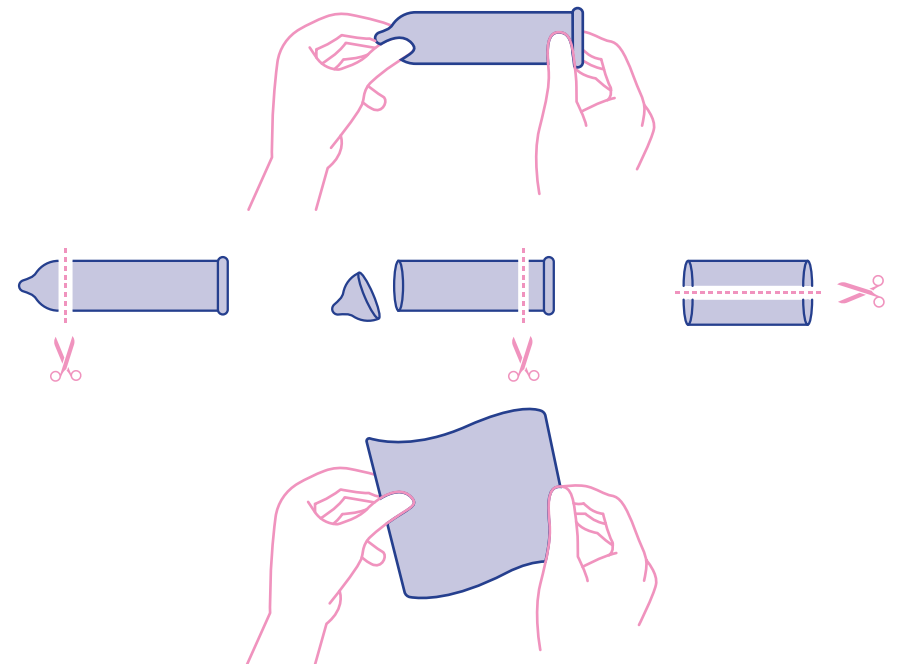
Hormonal contraception is not just used for birth control - some people use it to regulate their periods, or to minimise acne, or to deal with other medical issues.



Contraception for bisexual and pansexual girls and women and people assigned female at birth

No matter what your sexual orientation is, it is essential that you have considered how to protect yourself from Sexually Transmitted Infections before you have any physical sexual contact with another person. If you do not have access to dental dams, you can make them by cutting up condoms (see the image below.) You can avail of free condoms from the Sexual Health Centre. If you usually are not sexually interested in boys, you might not consider the risk of unplanned pregnancy. However, it is important to remember that any unprotected penetrative vaginal sex with someone who has a penis can lead to unplanned pregnancy.

DIY Dental Dam





Contraception for people assigned female at birth undergoing hormone therapy

- Hormone therapy is not an effective form of contraception. Even if hormone therapy has caused your periods to stop, you may still be ovulating, which means that you can still become pregnant.
- Hormonal contraception and testosterone (hormone therapy) can be used together. Some people may not prefer this method due to concerns about having estrogen in their system.

Contraception for people assigned male at birth undergoing hormone therapy.

- Hormone therapy is not an effective form of contraception. Hormone therapies do not always stop sperm from developing in the testicles, which means that you can still impregnate someone.
- You should not take hormonal contraception that is intended for people assigned female at birth. Instead, use a barrier contraception (e.g. condoms).

RECENT HISTORY OF CONTRACEPTION AND IRISH LAW



While owning and using contraceptives was always legal, laws restricting the sale of contraceptives meant that many Irish women and men drove across the border into the North of Ireland to bring back illegal contraceptives.

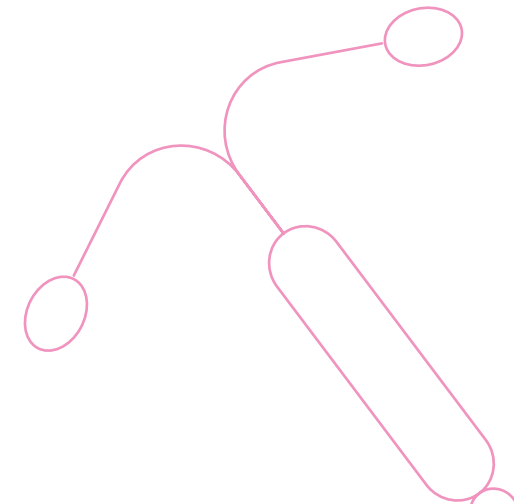
- In 1971, the Irish Women's Liberation Movement published the "Chains or Change" booklet, calling for contraception access (and an end to other human rights abuses faced by Irish women). They travelled to Belfast in the North of Ireland (where contraception was legal). They returned to the Republic of Ireland on the 'contraceptive train', waving contraceptives at the (very upset) custom officials.



- From 1978 - 1985 the Irish law allowed the provision of contraceptives under prescription only.
- In 1985, the law was updated to allow condoms and spermicides to be sold without prescription, but under strict regulation and only in medical settings.
- In 1990, the Irish Family Planning Agency (IFPA) was prosecuted for illegal sale of condoms at Virgin Megastore (a music/record shop in Dublin). Despite legal repercussions, the IFPA continued to sell condoms at the Virgin Megastore, arguing that, due to the AIDS crisis, they had "a duty to save people's lives".
- 1992: Condoms could be sold in retail outlets to people over the age of 17.
- 1993: The age restriction on the purchase of condoms was removed.



Today in Ireland, there is a variety of contraception available. However, it is not always accessible, because it is not affordable for many people. A survey by the United Nations' reproductive health agency (UNFPA) found that 11 per cent of women in Ireland were still facing an "unmet need" for contraception, with cost of contraception being the main barrier.



SEXUAL ACTIVITIES

Puberty brings changes in feelings as well as bodily changes. Sexual desire becomes a more important part of healthy social and personal relationships. It helps you to understand your own thoughts and feelings so you know what is right for you. Sex can be one of life's greatest pleasures. But it can also be very disappointing, frustrating or embarrassing. It can make you feel very vulnerable. It helps if we understand our sexuality and can communicate with our partners. Intimacy takes time and familiarity.



BY YOURSELF

Masturbation refers to stimulating your own genitals, usually with your hands or a sex toy. It is perfectly normal and safe. Knowing how your own body gets turned on can really help, if and when you do have sex with someone. If you know what you like then you can show the other person what works for you.

Orgasm is the climax or peak of sexual excitement. It usually involves pleasurable feelings and rhythmic contractions of the muscles. Ejaculation is the expulsion of fluid from the genitals. Usually, people assigned male at birth orgasm and ejaculate at the same time. For people assigned female at birth, ejaculation of fluid is not always associated with orgasm. This means that many girls, women and people assigned female at birth may require stimulation of the clitoris with fingers or sex toys to reach orgasm. This is why it's helpful to get to know your own body and what kind of stimulation you enjoy, before sharing sexual experiences with others.



WITH OTHERS

Most sexual experiences will start with a kiss or at least include kissing at some point. Everyone has their own individual style of kissing, so when you're still getting used to your own kissing style, it can help to start slow and gently!

Sex is not just about having sexual intercourse. It can include lots of things like kissing, touching, fondling, mutual masturbation (stimulating another person's genitals), or self-masturbation.

Safer sex involves giving and receiving ongoing consent, and giving and receiving sexual pleasure without passing semen, vaginal fluids or blood into your or your partner's body. Safer sex ensures that everyone involved is fully respected and protected. It prevents unexpected pregnancies and transmission of STIs (see section on STIs below).

ORAL SEX

Oral sex is using the mouth or tongue to arouse the genitals of a sexual partner. Oral sex can be given and received by people of all genders. Oral sex is a personal preference - some people love it and others don't like it at all. It is important that you are comfortable with what you do. Do not give oral sex if you have cold sores, as you could spread herpes (see section on STIs). Flavoured condoms can be used for oral sex.

VAGINAL SEX

Vaginal sex involves the penetration of a person's vagina, with another person's fingers, penis, or a sex toy.

ANAL SEX

Anal sex involves the penetration of a person's anus, usually with another person's penis, sex toy or fingers. If you are having anal sex it is very important to use a good quality condom and lubricant.



It is important that you are comfortable with what you do. You should never feel pressurised into doing things you are not happy about.

SEXUAL ACTIVITY CHECKLIST

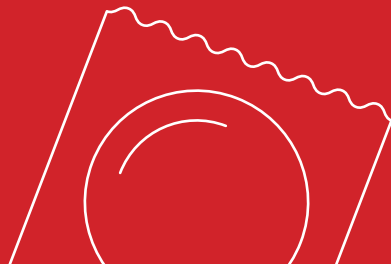
The age of consent for sexual intercourse is 17.

Before sharing any sexual experience with another person, such as mutual masturbation, oral sex, or any of the other activities listed in this booklet, it might be helpful to see if the statements below are true for you:

- ✓ My potential sexual partner and I have had conversations about using condoms and contraception.
- ✓ We have discussed the implications of becoming pregnant (if that is a risk for my sexual partner and I).
- ✓ I want to take part in a sexual activity for myself, not just because someone else wants me to or thinks I should.
- ✓ We have discussed what we would do if the condom bursts or rips.
- ✓ We can have fun together without actually having sex.
- ✓ I am not being forced or pressured to have sex.
- ✓ In our relationship (or friendship), I feel like it would be completely accepted if I say no to any particular physical or sexual interaction. I feel like there is no pressure at all to do anything that I don't feel comfortable and excited about.
- ✓ I feel comfortable and confident saying no or yes to any physical interactions.

You probably won't be ready for sex until you can tick all these boxes but remember even once you are ready – it still doesn't mean you have to!

If you have already had sex, it doesn't mean you have to have sex again any time soon! You can take some time out if you prefer.



PREGNANCY



Sexual intercourse can lead to pregnancy. If you are worried about getting pregnant, talk to someone you trust or contact an organisation listed at the back of this booklet for help. It is especially important to seek out support if you do not have support from your family or friends. You will also find useful information in this booklet in the section about your menstrual cycle. You can get pregnant at any stage during your menstrual cycle.

HOW DOES PREGNANCY START?



Conception begins when the male sperm and female egg meet and unite in the female fallopian tubes.

Conception is the start of pregnancy. A full-term pregnancy lasts for approximately nine months before the birth of a baby.

Ovulation is when the egg is released from the ovary. This is the time you are most likely to get pregnant.

It usually happens around 11 to 16 days into your menstrual cycle. However every person is different, so do not take this for granted. Get to know your own cycle.

The sperm is ejaculated into the vagina during sexual intercourse. If the egg is fertilised (when the male sperm meets the female ovum), it travels up the fallopian tube to the uterus where it embeds in the lining.

Hundreds of millions of sperm are ejaculated but it just takes a single sperm to fertilise the female egg.

There are two ovaries at the end of each fallopian tube. They produce and store the eggs (ova). Each egg has the potential to be fertilised by a sperm.

HOW DO YOU KNOW IF YOU OR YOUR PARTNER IS PREGNANT?

If you have had sexual intercourse and have missed a period, have more swollen or tingly breasts than usual, vaginal discharge has changed and you need to urinate more often, you may be pregnant. You can tell for sure by having a pregnancy test. It can be a good idea to bring a parent, friend or your sexual partner when having the test, as you may need the support.



PREGNANCY TESTS

If you think you may be pregnant you can have a pregnancy test with a GP or at a clinic. You can also avail of free pregnancy tests at the Sexual Health Centre in Cork, or contact us for details on the services in your area.

PREGNANCY: YOUR OPTIONS

If you are pregnant

If you discover that you are pregnant you may be scared or apprehensive about telling your parents or any other adult. Although they might be shocked when they first hear you are pregnant, it is important to tell an adult that you can trust about your pregnancy. After the initial surprise, they may be very supportive and want to help you. If you are worried about telling an adult such as a parent or guardian, you could first talk to a sexual health organisation such as the Sexual Health Centre and ask to speak with a counsellor.

Continuing the pregnancy

If you decide to continue with your pregnancy this may seem like an overwhelming prospect, but there are people that can help you throughout your pregnancy and afterwards. There are organisations there to support you. See the HSE 'My Options' website www.myoptions.ie for information about support agencies and those that offer free counselling for anyone experiencing an unplanned pregnancy.

It is important to tell your parent or guardian as soon as you are able to, and also to contact a doctor.

If you plan to carry the pregnancy to full-term i.e. if you plan to give birth, it is best not to consume any alcohol, cigarettes and any other drugs that could impact the pregnancy negatively. Your general health and your diet are even more important now to help produce a healthy baby.

During the first three months you may experience sickness and feel more tired than usual.

Most, but not all, people feel very healthy and energetic during the second trimester (3-6 months) of their pregnancy.

By the third trimester you will probably begin to feel the size and weight of the baby which may make you feel tired and uncomfortable.

It can be helpful and rewarding if the father is involved, where possible, with the pregnancy and birth of the baby.

Terminating the pregnancy

Abortion is a medical procedure used to end or 'terminate' a pregnancy. It is also referred to as a 'termination'. This procedure is used for many different reasons. It is a big and sometimes difficult decision, and there are supports available to anyone considering whether it is the right decision for them.

Is abortion legal?

Abortion is legal in Ireland. In 2018, people in the Republic of Ireland voted in a referendum to legalise abortion. This historic referendum received 66.4% support in favour of legalising abortion (by repealing 'the 8th Amendment').



How can I access abortion services?

Abortion care is free for people living in the Republic of Ireland. You can have an abortion for any pregnancy that is less than 12 weeks.

Irish law says that pregnancy must be dated according to your last menstrual period. 12 weeks of pregnancy usually means 84 days since the first day of your last period.

If you have been pregnant for less than 9 weeks, you can get an 'early medical abortion'. This involves taking medication to end the pregnancy. You will need to have 2 consultations with a 3-day wait in between them.

If you have been pregnant for 9-12 weeks, you can get a surgical abortion. This is a procedure to remove the pregnancy from the womb by a doctor using a suction method.

RECENT HISTORY OF ABORTION AND IRISH LAW



- From 1983 until 2019, there was an almost complete ban on abortion. Irish law recognised the “equal right to life” of “the mother” and “the unborn”. This ban reflected Catholic values and views on sexual morality.
- Due to the equal legal status of pregnant people and fetuses, maternity care was significantly restricted. Pregnant people in Ireland had to travel abroad in order to undergo an abortion - many people travelled to England and Wales.
- This caused stigma, trauma and shame for people undergoing crisis pregnancies, as they could not access the medical procedure in their home country.
- In January 2019, the Republic of Ireland began operating abortion services, following the 2018 referendum.

CONSCIENTIOUS OBJECTION

- Conscientious objection is when medical staff refuse to take part in a procedure if it goes against their religious or moral beliefs.
- Your GP might not provide abortion services. They do not have to provide these services. This may be because they conscientiously object to abortion.
- If your GP or doctor will not carry out an abortion, they should always refer you to someone who does provide the service. If your doctor is unhelpful, try to see another one.

For free, non-judgemental advice about your options:

- ‘My Options’: You can call this HSE pregnancy support service on **1800 828 010**.
- The Sexual Health Centre provides free counselling for anyone who is experiencing a stressful pregnancy or trying to decide how to respond to a pregnancy. Contact us at **021 427 6676**, info@sexualhealthcentre.com, or drop in to us at 16 Peters Street in Cork city.

PARENTING

Parenting can be daunting, but there is support available to help you decide if parenting is the right choice for you. You can get free counselling, to discuss your options. For more information, go to the HSE ‘My Options’ website or contact the Sexual Health Centre.

FOSTERING AND ADOPTION

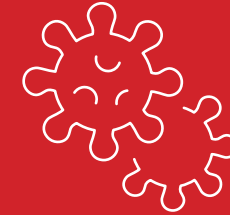
You might also consider fostering or adoption for your baby. Whatever option you take can be a very difficult decision and you should make sure that you make the choice that is most comfortable and right for you. There are organisations that can help you with any information you may need. For more information, go to the HSE ‘My Options’ website or contact the Sexual Health Centre.



RECENT HISTORY OF ADOPTION AND IRISH LAW

- Adoption practices have been heavily impacted by the Catholic Church's influence on the Irish State, and the meaning given to 'family' in Irish society and law.
- In the past, unmarried birth mothers and their children faced intense stigmatisation and shame. Adoption was used to solve what was viewed as a problem caused by the birth mothers. Many adopted individuals have not had access to their own birth certificates and adoption files.
- Since the 1920s, many unmarried pregnant girls and women in Ireland were sent to institutions funded by the State and run by the Catholic Church, such as the 'Mother and Baby Homes'.
- Many babies were informally adopted by families in the U.S.A. from these institutions in Ireland. Some adoptions were made against the wishes of the birth mothers, by deceiving them or forcing them to give consent to the adoption. Birth records were sometimes falsified.
- In 1953, adoption became legal in Ireland, but only for Catholic adoptive parents.
- There have been several changes to adoption law since 1953, but it was not until the 1970s that the law was changed without the influence of the Catholic church.
- The concept of family in Ireland has evolved significantly in recent decades to include a range of family forms. Legal and societal changes have had a positive impact on adoption practices.

HIV



HIV (Human Immunodeficiency Virus) is a virus which can damage the immune system. HIV is transmitted through semen, vaginal fluid, blood and breast milk. There is currently no cure for HIV, but there are effective treatments that enable many people living with HIV to live a long and healthy life.

U=U stands for Undetectable = Untransmittable

The U=U message is an important reminder about the effectiveness of HIV treatment. It means that if someone who has HIV is using HIV treatment (or medication) correctly, and if they have an undetectable viral load, there is no risk of HIV being passed on through sex. An undetectable viral load means that the HIV has been reduced (by treatment) to such small quantities that it can no longer be detected by standard blood tests.

Who is at risk?

Anyone who has had physical sexual contact with another person is at risk of contracting HIV. It is particularly important for precautions to be taken by gay, bisexual, and pansexual boys and men, and transgender people.

Why should you care?

Once HIV is in your body, it is there forever. If untreated, HIV can lead to AIDS (Acquired Immune Deficiency Syndrome).

What can you do about it?

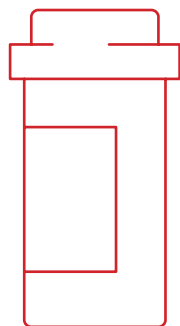
There is no cure for HIV, but there are treatments to help stop it damaging the immune system, so that you can remain healthy and prevent onward transmission. If you are worried about HIV, you can have a blood test done to check for HIV. You can have a rapid HIV test at the Sexual Health Centre. For more info, come in to the Centre on 16 Peters Street in Cork city, or contact us on 021 427 6676, info@sexualhealthcentre.com or our social media.

What is the window period?

There are different types of tests for HIV. Depending on the type of test used, most test results are accurate 3 weeks after you come in contact with HIV, but it can take up to 3 months.

What preventative measures can you take?

- Condoms: As with preventing Sexually Transmitted Infections, using a condom is the best preventative measure that you can take.
- TasP: TasP stands for 'Treatment as Prevention'. Treatment as prevention (TasP) refers to HIV prevention methods and programmes that use antiretroviral treatment (ART) to decrease the risk of HIV transmission. See 'U=U' above, at the beginning of this section.
- PrEP: PrEP stands for pre-exposure prophylaxis. PrEP is taken by people who do not have HIV, before having sex (pre-exposure) and after sex, to prevent HIV (this is called prophylaxis). PrEP can be taken every day, before and after sex or for a period of time before, during and after a holiday. Healthcare professionals will provide guidance on which option is best for you. If you decide to use PrEP, it is important to do this with support from a healthcare professional. PrEP is available for free through the HSE for people who meet the eligibility criteria. For more information you can contact the Sexual Health Centre.
- PEP: PEP stands for post-exposure prophylaxis. PEP is a course of HIV medication that aims to prevent HIV infection following a recent exposure to HIV, for example following a sexual contact. It must be started within 72 hours of a risk activity. It will not be effective after this time. A full course of PEP is for 28 days (4 weeks). PEP is available in many STI clinics in Ireland. If it is not possible to get PEP from your local STI clinic within 72 hours, PEP can be accessed in emergency departments. A list of locations for accessing PEP is available at www.sexualwellbeing.ie/pep.



RECENT HISTORY OF HIV IN IRELAND



- Medical treatment for HIV has evolved very significantly since the 1980s. The first cases of Human Immunodeficiency Virus (HIV) in Ireland occurred in the early 1980s. People did not understand what HIV was, and there was no treatment. Due to the lack of medical treatment at the time, HIV patients developed Acquired Immunodeficiency Syndrome (AIDS) which led to illness and death for many people.
- Many of the first cases of HIV and AIDS in the 1980s occurred in gay men. There was a lot of fear, abuse and stigma towards people living with HIV at this time. Around the world, governments, media and wider society treated HIV and AIDS patients as though they were to blame for the illness. This was an inhumane and extremely harmful approach, grounded in homophobia and sexual morality (because HIV could be transmitted through sex).
- Many healthcare workers were afraid to treat HIV and AIDS patients, because they were misinformed about how HIV could be passed on.
- The stigmatisation of HIV and AIDS patients led to increased solidarity within the LGBT+ community. For example, many lesbian women volunteered to care for AIDS patients who had no family supporting them.
- Today, HIV treatment such as antiretroviral therapy (ART), is free in Ireland. By accessing treatment and taking medication, a person with HIV can not transmit the virus to anyone else, and can live a long, healthy life.
- In many parts of the world today, people can not access treatment for HIV. Even though important medical advancements have been made in Ireland, there is still a lot of stigma and misinformation in Ireland about HIV.
- It is important to spread the 'U=U' message (see above, at the beginning of this section) to fight stigma. People on effective treatment with an undetectable viral load cannot transmit HIV to their sexual partners. Effective treatment means the treatment reduces the level of virus in a person's system to undetectable levels. Support is available at the Sexual Health Centre for anyone who has questions or concerns.

SEXUALLY TRANSMITTED INFECTIONS

People under the age 29 have the highest rates of STIs in Ireland.

Sex can be fun and enjoyable, but if you want to stay healthy, you need to take precautions. When you have unprotected sexual contact with a person you may pick up a Sexually Transmitted Infection (STI) from them. A person who has an STI can pass it on to another person without even realising. STIs are increasing in Ireland. The best way to avoid them is to know about them and protect yourself.

Who is at risk?

Anyone who has had physical sexual contact with another person is at risk of an STI.

STIs are on the increase in Ireland.

Some STIs may not show any symptoms but that does not mean they are not causing damage. Chlamydia, for example, often shows no symptoms but can lead to problems with fertility. It is important to have an STI screening if you have unprotected sexual contact with a partner whose STI status you don't know.

You can get an STI the first time you have sex.

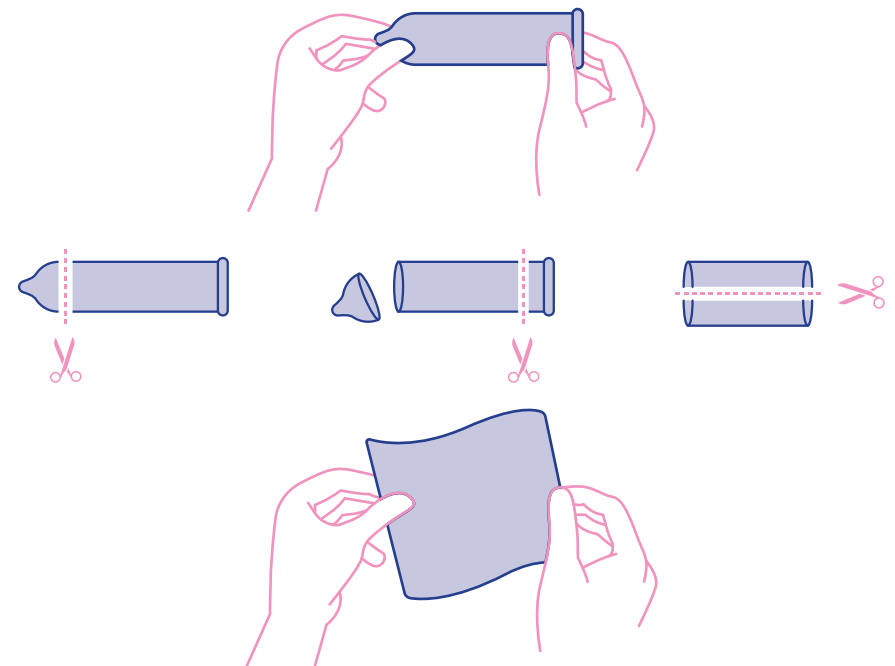
You do not need to have penetrative sex to contract an STI.



STI prevention for lesbian, bisexual and pansexual girls and women and people assigned female at birth

It is essential that you have considered how to protect yourself from STIs before you have any physical sexual contact with another person. Whatever your sexual orientation, if you are sexually active, you are at risk of contracting a STI. If you do not have access to dental dams, you can make them by cutting up condoms - see the image below. You can avail of free condoms from the Sexual Health Centre.

DIY Dental Dam





STI prevention for people assigned male at birth

To protect yourself from STIs, it is always necessary to use a condom for penetrative sex. Some people use PrEP to protect themselves from HIV (see the HIV section below). It is important to remember that PrEP will not protect against other STIs. Only condoms can prevent transmission of other STIs. You can avail of condom demonstrations and free condoms from the Sexual Health Centre.

How do you know if you have an STI?

Often you can have an STI and show no symptoms.

It is possible to have more than one STI at a time.

The only way to find out if you have an STI is to be tested.

Some of the most common symptoms are:

- No symptoms! Many people who have an STI have no symptoms and do not know that they have an STI - this is why it's important to get tested.

Some people may display the following symptoms:

- Unusual or unpleasant discharge from your vagina, penis or anus.
- Pain or burning when urinating.
- Unusual pain during sex.
- Pain and swelling of the groin area and testes.
- Irritation, rashes, sore patches, lumps around the genitals or anus.

You can have an STI and not know it

You cannot tell if someone has an STI just by looking at them.

People sometimes describe having no STIs as being 'clean'. This language creates prejudice and stigma towards people who have an STI, by implying that they are not 'clean'. If a person gets an STI it does not mean that they are dirty. It just means that they have a medical condition that needs attention. Try to use phrases such as 'free of STIs' or 'clear of STIs' instead of saying clean.

How can you reduce the risk of STIs?

- Condoms help protect against most STIs, so use them correctly every time you have sex.
- Avoid oral sex if you or your partner has sores on the mouth, gums or genitals.
- Use (flavoured) condoms to make oral sex safer.
- Anal sex is a high risk activity for STI transmission. You must always use a good quality condom and lubricant.
- Be careful if using alcohol or other drugs, as they can make you do things that you might regret and leave you more open to taking risks.
- Have regular check-ups for STIs. We recommend that sexually active people get tested at least once a year.
- You and your partner should have STI screenings before starting a new relationship.
- If you are worried that you may have an STI, get tested. Check the end of this booklet for contact details.



Where can you get tested?

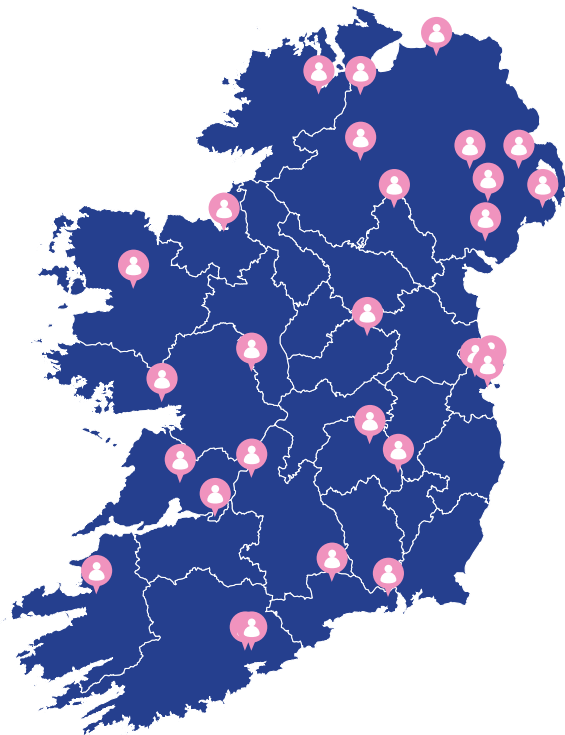
Your local STI Clinic offers a free and confidential screening and treatment.

The clinics can be busy so it is best to telephone as most clinics work by an appointment only basis.

You can contact the organisations listed on the back cover of this booklet for information on the services in your area.



The window period is the length of time you need to wait to make sure that your result is accurate. If a Sexually Transmitted Infection has been passed on, it will take time before the infection is visible in a medical examination i.e. the infection won't show up on a test straight away, so you may need to wait days, weeks or months before getting a test. Each infection requires a different 'window period'.



MOST COMMON STIS

Some STIs are caused by a virus (genital warts, HIV, hepatitis A, hepatitis B and herpes), and other STIs are caused by bacteria (chlamydia, gonorrhoea and syphilis) or by skin contact (pubic lice, crabs). Some of the more common STIs in Ireland are genital warts and chlamydia. Other STIs include trichomoniasis (pronounced tric-o-mon-i-uh-sus), non-specific urethritis (NSU), syphilis (pronounced sif-ill-is) and hepatitis. You can get more information about them on www.sexualhealthcentre.com/stis, or read about some of the most common STI's in Ireland below. It is advisable to get tested regularly if you are sexually active, or if you have ever had unprotected sex, or if a condom broke or ripped.

Ano-genital warts

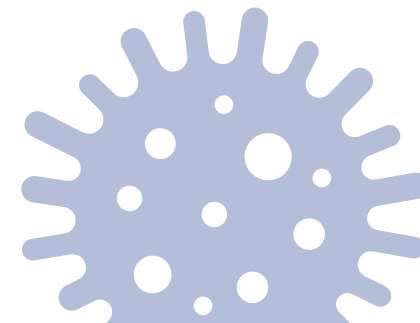
Ano-genital warts are caused by a virus (the human papilloma virus). Warts can be small or large lumps. The warts that people sometimes get on their hands can not be transferred to genitals.

Why should you care?

Ano-genital warts are the second most reported STI in Ireland. You can pass on the wart virus easily by skin-to-skin contact. Warts are easy to treat but the wart virus can sometimes be in your body for about a year before you see any growths. You could pass it on without even knowing you have it. Once you get the wart virus it may remain in your body forever and warts may reappear even after removal.

What can you do about them?

Warts can be removed or treated at a clinic. It may take a few treatments at a clinic to remove them.



Chlamydia (pronounced cla-mid-e-a)

Chlamydia is the most common, curable bacterial infection.

Why should you care?

Chlamydia is the most frequently reported STI in Ireland. Many people in Ireland have chlamydia and do not know that they have it, because it often shows no symptoms. If you have chlamydia and it is not treated, you can get serious infections and may become infertile (i.e. you may not be able to become pregnant or make somebody else pregnant in the future).

What can you do about it?

Chlamydia is easy to treat if diagnosed early with special antibiotics prescribed by a GP or STI clinic.

What is the window period?

Most test results are accurate 2 to 6 weeks after you come in to contact with chlamydia, so do a test a few weeks after the sexual activity.

Genital Herpes (pronounced gen-it-al hurr-pees)

Genital herpes is caused by a virus called herpes simplex. Type 1 of this virus is normally found around the mouth and causes what we know as cold sores. Cold sores are quite common and almost ALL of them are not an STI. Type 2 is found around the genitals and causes genital herpes (sores).

Why should you care?

Once you have the herpes virus it stays in your body forever. It can be possible to pass on cold sores from the mouth to the genital area through oral sex. The symptoms can be painful and can make people feel unwell.

What can you do about it?

You can get treatment to help with the symptoms. It also helps to relieve symptoms when they appear, if you keep the genital area cool and dry, wear loose cotton underwear and avoid tight clothing and sunlight.

What is the window period?

Most swab tests are accurate as soon as you have symptoms. Most blood tests are accurate 12 - 16 weeks after the sexual or physical contact.

Gonorrhoea (Pronounced gon-or-ee-a)

Gonorrhoea has recently been increasing in Ireland. Gonorrhoea is caused by bacterium and is transmitted during unprotected vaginal, anal or oral sex with an infected person and from an infected person to their baby during childbirth.

Why should you care?

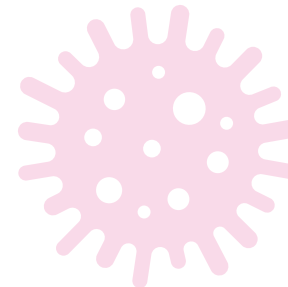
Over 80% of women and over 50% of men who have gonorrhoea may have mild or no symptoms. There are sometimes serious complications if it is left untreated.

What can you do about it?

Correct use of condoms can reduce the risk of transmission. Gonorrhoea is treated with antibiotics. You can have a test at an STI clinic.

What is the window period?

Most test results are accurate 7 days after the sexual contact.



OTHER INFLUENCES ON YOUR HEALTH

INTERNET



The internet can be a great source of information; however it is important to keep in mind that a lot of the information provided on the internet is not always objective, correct or true.

In an increasingly digital world, our online safety is more important than ever. Due to the growth of the internet and the number of internet users, online safety is becoming more complex. Safety issues come up in relation to online relationships, 'cyber sex' and sharing intimate images and videos online. Along with this comes an increased chance of exposure to various forms of abuse and exposure of personal information. For guidance on staying safe online, have a look at the following blogpost: www.sexualhealthcentre.com/blog/online-safety.

Some issues that arise online come from social media safety, making comparisons with other people, body image, and porn consumption.

SOCIAL MEDIA



Social media provides a great opportunity for communicating with others. You can improve your safe use of social media if you:

- Limit the amount of personal information on your social media profile e.g. do not share your schools, hometowns and full date of birth etc.
- Accept only people you actively know as your friends, as unfortunately some people are not who they say they are.
- If chatting online, only speak with people you know.

- Do not let any photos be taken of you via webcam.
- If you experience any bullying while online, you can screenshot the evidence, avoid responding and block or report the person. If the messages are ever threatening, you can report it to An Garda Síochána. You can also contact one of the support services at the end of this booklet, such as Childline.
- Sexting involves sharing sexual messages, and nude or sexual pictures and videos by message. When an image or video is shared, it is difficult to control whether it will be shared again with and by other people.
- It is illegal in Ireland to knowingly view, download or share sexualised content involving people under the age of 18, as it is classified as 'child pornography'. This includes an image or video of a person aged under 18 engaging in sexual activity or showing their genitals. For example, if you are under 18, it is illegal for you to have or share a picture of your genitals. Edited, animated, or simulated content, as well as audio content can also be classified as 'child pornography'. If you see (or if someone sends you) this type of content, you can contact An Garda Síochána and anonymously report the content on www.hotline.ie.
- How you appear online should be up to you. Under Coco's Law, it is illegal in Ireland to take, share or threaten to share intimate images or videos of someone without their consent. For example, if you take a picture of yourself and send it to someone, it is illegal for that person to share it without your consent. This includes edited content or 'deep fakes'. If you were or are in a relationship with the person who has shared or threatened to share the content without your consent, this increases the seriousness of the crime, according to Irish law. You can contact one of the services listed at the end of this booklet for support. If someone shares your intimate images or videos without your consent, you can:
 - Screenshot the shared content and images as evidence.
 - Report it to An Garda Síochána
 - Report it to the social media platform (if it is on a social media platform).
 - Talk to someone you trust.

MEDIA AND BODY IMAGE

You might enjoy looking at pictures of celebrities and influencers but the majority of pictures that we see are photoshopped or digitally enhanced 'perfect' portrayals of these people. In the 'real world', people are all different shades, shapes and sizes. If you are experiencing anxiety over your body shape or image, you are not alone.

Contact a support network such as www.bodywhys.ie or any of the organisations listed on the back cover.



PORNOGRAPHY (PORN)

People watch pornography for various reasons e.g. sexual arousal, to aid masturbation, curiosity or to learn about sex. While some pornography can be enjoyable to watch, it is not a reliable source of information regarding sexual relationships and safety. It is illegal for someone to show pornography to a person under 18. If you do ever see pornographic videos, it is important to recognise the following aspects:

- Condom use, consent and communication are often not included in pornography. These are all crucial aspects of healthy sexual interaction.
- Editing tools are used in pornography, creating unrealistic standards of how adult bodies look.
- A lot of pornography includes aggression, abuse and violence. This is never acceptable.
- The sex in pornography is not an accurate representation of sex in real life, as it is being performed by actors.
- Some people feel that pornography puts undue pressure on them to engage in sexual activities that they are uncomfortable with or to look like the images in porn films.
- Pornography is an industry. It does not portray normal lives of normal people.



ALCOHOL, TOBACCO AND ILLICIT DRUGS

Binge drinking is on the increase amongst young people in Ireland, often resulting in increased risk of STIs and unplanned pregnancy. You might have risky, unplanned and often unsatisfactory sex after using alcohol or other substances. You are still responsible for your behaviour even if you are drunk or using drugs.

STAYING SAFE WHILE OUT AT NIGHT TIME:

- Keep your phone charged and credit topped up.
- Stay with your friends/group.
- Let people know where you are.
- Do not walk home on your own.
- Keep money for a taxi and only use a licensed taxi service.
- Never leave your drink unattended.
- Never arrange to meet someone from the internet you do not know.
- Do not accept drink or drugs from a stranger.
- If drinking, do so responsibly and remember to look after yourself and your friends.
- Smoking tobacco is extremely addictive so it is best to never start smoking. It negatively impacts fertility, and one in every two long term smokers will die from a tobacco related disease.

FREQUENTLY ASKED QUESTIONS

Q. Can flavoured condoms be used for penetrative sex?

A. No – flavoured condoms have chemicals and sugars present in the flavouring. This can affect the pH balance in the vagina and lead to yeast infections or irritation. Flavoured condoms should only be used for oral sex.

Q. Is it safer to use two condoms?

A. Never use two condoms together as this will cause friction and may result in the condoms ripping or tearing.

Q. Is it possible for someone to get pregnant when on their period?

A. Yes, it is possible for someone to get pregnant during their period as a person may ovulate (release an egg) more than once a month. Even though there is a more fertile time of the month (11-16 days into a menstrual cycle), there is never a 100% 'safe' time of the month.

Q. Is vaginal and/or clitoral orgasm always achievable?

A. Orgasms are different for everyone - some people will not have the same type and frequency of orgasms as other people. People will get pleasure (and/or orgasm) from stimulation of different parts of their body and genitals. Some studies have shown that within cisgender heterosexual couples, men reach orgasm much more often than women. Researchers do not know for certain why this is the case, but some blame cultural and societal perspectives and a lack

of education regarding pleasure. This is why it is so important to be comfortable and understanding of your own body, desires and boundaries, and to be relaxed with whoever you are sharing sexual experiences with.

Q. If someone swallows sperm can they get pregnant?

A. No - you cannot get pregnant from swallowing sperm. Sperm has to enter the vagina for pregnancy to occur. However there is a risk of STI infection.

Q. Does it hurt the first time somebody has sex?

A. Sex should not be painful for anyone. The first time can be a daunting new experience and may be slightly uncomfortable for some people at first. Take your time and communicate with your partner throughout to ensure the best possible experience for both of you.

Q. What is the average penis size?

A. The average penis size is approximately 3 inches when flaccid (not erect), although everyone is different and should not compare themselves to others. A penis can be much the same size when flaccid and erect or there may be a big difference between the penis when it is flaccid or erect. Both are perfectly normal.

Q. What is a yeast infection (thrush)?

A. Anyone can get a yeast infection, even if they are not sexually active. It mostly affects girls, women and people assigned female at birth. A yeast infection causes a pH imbalance in the vagina, producing a heavy discharge and irritation. It is easily treated with over the counter products from the pharmacy. Thrush is not an STI, but can be transferred between partners during sexual contact. Using non-perfumed products and wearing cotton underwear can help prevent a yeast infection from occurring.

Q. Can anal sex lead to pregnancy?

A. While penetration of a person's anus does not cause pregnancy, it could lead to pregnancy if semen leaks into the vulva.

GLOSSARY



A

Asexual/ 'Ace': A person who generally experiences little or no sexual attraction to others or possesses little or no desire for sex. Some asexual people do experience romantic attractions. 'Ace' is short for 'asexual'.

B

Biphobia: Prejudice or discrimination against bisexual people due to their sexuality. Bisexuals often face their own set of discrimination such as a belief that they are more sexually active, untrustworthy partners and not valid in LGBTI+ spaces.

C

Consent: Consent is an agreement to participate in a specific activity or action. It cannot be forced. It must be mutual, voluntary, enthusiastic and ongoing agreement.

D

Dead name: The name given at birth to a trans or non-binary person, which they no longer use.

F

Fluid: When something is fluid, it is changeable e.g., a sexual or gender identity that changes. Regarding terms such as 'gender fluid' or 'fluid sexuality', fluid(ity) describes an identity that may change or shift over time (e.g., man and woman; bi and straight).

G

Genital herpes: Genital herpes is caused by a common virus called herpes simplex. Type 1 of this virus is normally found around the mouth and causes cold sores. Herpes-type 1 is not a Sexually Transmitted Infection. Herpes-type 2 is found around the genitals and causes genital herpes.

H

Homophobia: Prejudice or discrimination against gay people due to their sexuality.

I

Intersex: An umbrella term for a wide range of natural biological variations in people who are born with a chromosomal pattern, a reproductive system, and/or sexual anatomy that does not fit typical binary notions of male or female bodies.

K

Kinsey Scale: The continuum model devised by Alfred Kinsey in 1948 that plotted sexuality from 0 to 6; zero being exclusively heterosexual and six being exclusively homosexual.

L

Lesbophobia: Prejudice or discrimination against lesbians due to their sexuality. Lesbophobia is a form of sexism against women that intersects with homophobia.

M

MSM: MSM stands for men who have sex with men. This term emphasises the sexual behaviour, rather than the sexual identities of the individuals. Some men who have sex with men do not necessarily identify as e.g., 'gay' or 'bisexual'.

N

Non-binary/ 'Enby': Umbrella term for individuals whose gender identity is not solely a man or a woman. Includes those who identify as agender, bigender, gender fluid, genderqueer, and various other genders. 'Enby' is a phonetic spelling of NB, short for nonbinary.

O

Outing: Disclosing someone's gender or sexual identity without their consent. Usually done with malicious intent, although some people can out another person without realising the significance of what they have done.

P

Performing gender: 'Gender performativity' is a term that was first used by the feminist philosopher Judith Butler. Butler argues that people learn to behave in particular ways in order to fit into society, and that the idea of gender is a

performance expressed through body language, speech patterns and clothing choices.

Q

Queer: An umbrella term to refer to all LGBTI+ people. Due to its historical use, and present-day use as a slur against many communities, it is not embraced or used by all LGBTI+ people. Some people find it offensive, while others have reclaimed it. There is a growing number of younger LGBTI+ people that embrace the term.

S

Sex:

1. A category of male or female, determined by a person's internal gonads (e.g., testicles, ovaries), external genitalia (e.g., penis, vulva), chromosomes (XX, XY or other variation), hormones (e.g., testosterone, estrogen, progesterone etc.), and secondary sex characteristics (e.g., facial hair or breasts). Intersex people have variations of sexual characteristics and do not fit neatly into our ideas of typically male or typically female.
2. Sexual activity.

U

U=U: This stands for Undetectable Equals Untransmittable. The U=U message promotes the effective antiviral treatment of HIV. It means that if someone who has HIV is using HIV treatment (or medication) correctly, and if they have an undetectable viral load, HIV will not be passed on through sex. An undetectable viral load means that the HIV has been reduced (by treatment) to such small quantities that it can no longer be detected by standard blood tests. The U=U message helps to eliminate stigma around HIV.

W

WSW: WSW stands for women who have sex with women. This term emphasises the sexual behaviour, rather than the sexual identities of the individuals. Some women who have sex with women do not necessarily identify as e.g., 'lesbian' or 'bisexual'.

USEFUL CONTACTS

BeLonGto

Parliament House, 13
Parliament Street, Dublin 2
01 670 6223
www.belongto.org

Childline

1800 66 66 66
www.childline.ie

COSC (the National Office for the Prevention of Domestic, Sexual and Gender-based Violence)

www.cosc.ie

Gay Project

021 430 0430
www.gayproject.ie

GOSHH

(Gender Orientation Sexual Health and HIV)
Rosewood Place,
18 Davis Street, Limerick
061 314 354
087 829 1553
www.goshh.ie

HIV Ireland

70 Eccles street Dublin 7.
01 8733799
info@hivireland.ie

HSE Drugs / HIV Helpline

1800459459
helpline@hse.ie
www.hse.ie/drugshivhelpline

Intersex Ireland

intersex.ie@gmail.com

LINC (Lesbians in Cork)

White Street, Cork
021 480 8600
www.linc.ie

LGBT Helpline

1890 929 539
www.lgbt.ie

Rape Crisis Network Ireland

1800 778 888
www.rcni.ie

Samaritans

7 Coach street, Cork
116123

Sexual Health Centre

16 Peters Street, Cork
021 4276676
www.sexualhealthcentre.com

Sexual Health Network

www.mysexualhealth.ie

Sexual Violence Centre

5 Camden Place, Cork
1800 496 496
www.sexualviolence.ie

Sexual Health West

Ozanam House, St Augustine Street, Galway
091562213
info@aidswest.ie
www.aidswest.ie

Squashy Couch

34 The Mall, Waterford
051 859 000
www.facebook.com/pages/Squashy-Couch

SpunOut

www.spunout.ie

TENI

(Transgender Equality Network Ireland) 4 Ellis Quay, Arran Quay Dublin 7
01 873 3535
office@teni.ie
www.teni.ie

Youth Health Service (YHS)

Penrose House,
Penrose Quay, Cork
076 108 4150
www.yhs.ie

STI CLINIC LOCATOR

Carlow

STI Clinic, Carlow District Hospital, Athy Road.
Tel: 051 842 646

Clare

STI Clinic, University Hospital Ennis. Tel: 061 482 382

Cork

STI Clinic, South Infirmary Victoria University Hospital, Old Blackrock Road.
Tel: 021 496 6844

STI Clinic, Youth Health Service, Penrose House, Penrose Quay, Cork City.
Tel: 076 108 4150

Donegal

GUM/ STI Clinic, Letterkenny General Hospital, Letterkenny.
Tel: 074 912 3715

Dublin

GUIDE Clinic, St. James's Hospital, James's Street, Dublin 8.
Tel: 01 416 2315/6

STI Clinic, Mater Hospital, Eccles Street, Dublin 7.
Tel: 01 803 2063

Gay Men's Health Service, Meath Primary Care Centre, Heytesbury Street, Dublin 8.
Tel: 01 921 2730

Galway

STI Clinic, Portiunucula Hospital, Ballinasloe.
Tel: 090 964 8372 (ext 676)

University Hospital Galway, Newcastle Road.
Tel: 091 525 200

Kerry

STI Clinic, University Hospital Kerry, Tralee.
Tel: 021 496 684

Laois

STI Clinic, Out patients Dept., Midland Regional Hospital, Block Rd., Portlaoise.
Tel: 086 859 1273

Limerick

STI Clinic, University Hospital Limerick, Dooradoyle.
Tel: 061 482 382

Louth

GUM Clinic, Louth County Hospital, Dublin Road, Dundalk.
Tel: 086 824 1847

STI Clinic, Our Lady of Lourdes Hospital Drogheda.
Tel: 086 824 1847

Mayo

STI Clinic, Mayo General Hospital, Castlebar.
Tel: 094 902 1733 (ext 3501)

Monaghan

GUM Clinic, Monaghan General Hospital, Monaghan.
Tel: 086 824 1847

Sligo

GUM Clinic, Sligo General Hospital, The Mall.
Tel: 071 917 0473

Tipperary

STI Clinic, South Tipperary General Hospital, Clonmel.
Tel: 051 842 646

STI Clinic, University Hospital Nenagh.
Tel: 061 482 382

Waterford

STI Clinic, University Hospital Waterford Dunmore Road.
Tel: 051 842 646

Westmeath

STI Clinic, Midland Regional Hospital, Longford Road, Mullingar.
Tel: 086 416 9830

www.sexualhealthcentre.com | info@sexualhealthcentre.com | 021 427 6676

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