



POSITIVE —
OR
— NEGATIVE
HIV IS IN OUR LIVES

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POSITIVE SEX
AND RISK

What does risk mean after a positive diagnosis? Do boundaries and attitudes to sex change? How do we think or talk about risk?¹

This fact sheet looks at sex and risk and offers strategies and practical tips on how they play out in the lives of positive gay men. For many, this is a considered process, which weighs the pleasures and the risks.

Risk is not only about sex, but also, the risks you might take with your health and emotional well-being. It is also about letting yourself be vulnerable.

Talking honestly about sex and the risks we take might help us consider what we're doing, and whether we would rather do things differently.

SEX IS ABOUT EXPLORATION

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Dan: I've found that there are social boundaries put on what's permitted in terms of talking about sex and risk. If we don't talk about it, it's difficult to deal with the issues.

For each of us, sexual experiences and needs change over time and so do boundaries. This may have something to do with getting older, changes in relationships, or even an HIV diagnosis, wanting to try new things or the need to emotionally connect with someone. Sexuality is also something to explore.

Derek: Sex changes every time I have it. I certainly would try more things now than ten years ago because I feel more confident in my ability to negotiate sex with my partners.

Sex can be an emotional connection and for some it might be a transitory connection. For Dan, finding someone to fulfil his emotional needs has become more important; especially now he has started HIV treatments.

Dan: Sex is something I've got lost in because of how high you can go with your own desire and libido.

Now, I'm going into a new direction with positive sexuality and intimacy. The sex and drug to excess culture is always there, but for now, it doesn't fulfil my emotional needs. I want to feel fulfilled as a positive guy, with another positive guy.

And sometimes sex is not always about the emotional connection. Sometimes it's about more basic desires.

Richard: Sometimes you just want to get fucked. It's feeling the sensations. It can be disconnected from emotion because of the whole pleasure of it and the imagination making the experience into something that's satisfying you in the moment.

Derek: With anonymous sex it's a self-satisfying thing. Sex with my partner is more non-sexual now and more of an emotional tenderness.

Sex is where gay men learn about their bodies and their emotions. By having this reference point Dan realised his strengths and vulnerabilities.

Dan: Through sex I've discovered how comfortable other guys feel about sex, their bodies and their emotions, and how strong they really are. I've realised I am strong, but the vulnerability is always there.

RISK DOESN'T GO AWAY

While many positive gay men feel they have passed some kind of boundary since diagnosis, there are still a number of sexual health issues or risks, which can concern them.

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Risk is not only about sex, but, also the risks you might take with your emotional well-being.

Neville: I've always classed risk in terms of emotional risk. There's the emotional risk that I might get attracted to someone and it's not being returned in the same way. It's something that can happen in sex quite unexpectedly.

For positive men, there is the fear and concern of passing on HIV to sexual partners. Managing risk has meant increased responsibility for Nicholas, and even more reason to care for his partners.

Nicholas: A positive diagnosis has increased my responsibility. It's increased the amount of energy I put into making sure that the other person is okay, whether they're positive or negative.

For negative gay men, any sex without condoms, with other negative men, is placing a huge amount of trust in another person. This trust can often be misplaced.


Rick: We'd both penetrated each other and I told him I thought it had been a bad decision. He said: "There was nothing to worry about". He was basically saying that he wasn't positive. With someone you've only known for a matter of days, you can't necessarily trust them 100%. Do you think they're going to give an honest answer? (Rick took PEP² and did not sero-convert).

Terry: I was having sex with somebody and we were both quite drunk on that night. At some point, I reached down to feel

We might take risks if we are in love.

Is the feeling of the moment affecting our decisions?



A man with a short haircut, wearing a white polo shirt and dark jeans, stands outdoors. He is looking directly at the camera with a neutral expression. To his left is a large, dark stone sculpture. The background shows a blurred cityscape with buildings and greenery under an overcast sky.

Some guys tell you their HIV status. Some make assumptions and guesses. But they're not always right.

whether or not there was still a condom and there wasn't. I stopped, I didn't panic, I just said to him: "Do you know your HIV status?" He said: "I'm negative". I then asked: "Did you come inside me?" He said: "No he didn't". I believed him. I thought what we did was a very low risk. (Terry was subsequently diagnosed positive).

Some gay men rely on casual partners to disclose or even know their HIV status. Even if they genuinely believe they are HIV negative, they may not have had a recent HIV test.

'KNOWING' SOMEONE IS POSITIVE

There are a lot of myths around - myths about who might or might not be positive: "If he looks healthy, he might be negative". "If he didn't disclose, he isn't positive". "If a guy is having unprotected sex or is outside "safe" sexual boundaries he is positive".

Scott: I would make assumptions that a lot of the guys I was having sex with weren't positive because (a) they weren't disclosing, therefore they probably weren't and (b) they didn't look positive.

For both Ken and Todd, being outside the boundaries of safe sex (risk taking) is when assumptions are made.

Ken: Usually, for me, it's by asking. I also look for codes. If you're at a sex on premises venue

or in a group sex situation and a guy is being screwed by different guys without a condom, you just assume he is positive. Being outside the boundaries of safe sex where someone's doing unprotected sex, you just assume.

However, it is the nature of codes that they are not explicit and they can be read in different ways.

Christopher: A few guys I've met on the Internet have talked about HIV but most of them talk about "bareback".

That's their coded way of talking about being HIV positive. That's a problem because not everybody understands that code.

And some guys will assume that some sex venues are a bit more HIV positive.

Graeme: Of course, there's no such thing as a positive venue. Some venues have a younger and more pumped up crowd. Whereas, another is seen as darker or more "down and dirty" where there's a lot of group sex. Because of those things it must be positive. It says a lot about our assumptions.

For others it's all in the language.

Derek: I think verbal language is one indicator. Like "I want you to fuck me", no mention of condoms and then giving positive reassurance that that's okay. I met this really hot guy and he said: "I like guys to come in my arse". I understood what that meant. He was positive.

A lot of positive guys whom I've had sex with are very upfront about their status and I'm very upfront about my negative status.

NORMALISING DISCUSSIONS ON RISK

Some gay men don't know how they became positive. Some guys said that they had practised safe sex, according to the 'rules' before they were diagnosed, and were unable to recall a risky incident, which might have caused them to sero-convert. They could not understand what had happened, as it *'did not make sense'* to them.

The stigma and anxieties around 'slip-ups' may have an impact on how gay men manage risk.

For many, normalising discussions on risk is one way to manage it.

Noel: I am ashamed that I got drunk the night I contracted HIV. Although I attempted to have safe sex, I failed because I was intoxicated. There is a barrier to saying to someone that I was off my face or I was completely pissed when this happened. If I wasn't pissed I would have realised there wasn't a condom on earlier and I would have gone straight to the hospital to get PEP.

Memory can be unreliable, particularly when remembering difficult experiences under the influence of drugs or alcohol.

Roger: For somebody to say he was in the backroom and he just inserted his cock for three seconds... when you're in that backroom what's three seconds? What's thirty seconds and what's thirty minutes? In this circumstance how do you navigate your way around to finding out exactly what the risk was?

Guys read codes around disclosing HIV in different ways. Sometimes you need to check in and make sure you both really mean the same thing.

The Internet can play an important role for positive gay men in negotiating sex and building confidence around HIV and discussing their status.

OPTIONS ARE OPEN WITH ANOTHER POSITIVE GUY

While many gay men are involved in very satisfying pos-neg relationships, some HIV positive men have made the decision to only seek out other positive men for relationships. The freedom of unprotected sex between HIV positive men came as something of a 'revelation' to many. It also brings a whole lot of responsibilities.

Ross: Becoming HIV positive means change and brings a whole lot of responsibilities not just for your health and emotional well-being, but also, in your relationships.

Dan believed a positive diagnosis gave him a license to expand his sexual boundaries. Intimacy was important and casual unprotected sex with other positive guys was a way to maximise pleasure, manage disclosure and HIV stigma.

Dan: I've been positive for ten years. My decision to have sex with other positive guys helped my anxiety around disclosure. Pos sex was also a way to manage the social stigma of being HIV positive.

Who, when, how and why to tell can be one of the biggest issues positive gay men face? (See our fact sheet no. 10 *the Dynamics of Disclosure* www.plwha.org.au). Relationships change over time and so too the ways you do (or don't) disclose your HIV status.

Telling people on your terms is about taking control.

The Internet can play an important role for positive gay men in negotiating sex and building confidence around HIV and discussing their status.

Christopher: If I'm looking for sex with another positive

guy, disclosing that I'm HIV positive upfront can be a way for me to be in control. The Internet, in particular, can be a safer place to do this.

However, the burden of passing on HIV and getting an STI has made some positive men less sexually adventurous. Anxieties and pressures of disclosure, stigma and sexual rejection are challenges.

Noel: I was diagnosed six and a half months ago. Since then I've attempted to go out and have sex, but there's something that has changed for me.

There's a lot more pressure on me having to sit down and explain my HIV status. For me, since my diagnosis, sex has taken a backseat. My fantasies are still the same, but I see HIV as a social barrier. You know, the whole disclosure thing. It's early days and those ways of thinking will, I hope, change.

Many find dealing with a positive diagnosis evolves over time with its ups and downs emotionally, psychologically and sexually. As your confidence grows, your knowledge and relationships develop and so do your attitudes to sex. At different times we desire different things from our relationships and from sex. Some flexibility is needed to be able to adapt to changes and to negotiate each change.

Phil: When I was first diagnosed, I thought I should be dating someone who's positive because that's the responsible thing to do. I don't believe that now. That's totally different to how I felt six months ago and how I felt a year ago. A year ago, I didn't want to be with anybody. In two years time I might have different criteria based on where I'm at emotionally.

Some gay men rely on casual partners to disclose or even know their HIV status. Even if they genuinely believe they are HIV negative, they may not have had a recent HIV test.

Drugs and alcohol might impair your judgements and shift your boundaries.

SOME POINTS TO CONSIDER –

- Using condoms is the best way to look after your sexual health, but they are only part of the equation. If you are sexually active test regularly for STIs (every 3 to 6 months is a guideline).
- If you are HIV negative and have had unsafe sex get PEP (Post-Exposure Prophylaxis) quickly (at least within 72 hours, but even sooner is better).
- Maintaining the routine of daily life while waiting for test results, can help you not get caught up too much in anxiety.
- There might be situations in which you take greater risks (e.g. you're in love, out of it on drugs or alcohol, starting a new relationship or new to a particular scene).
- If you are worried you might be HIV positive, have a test and take control of your health.
- We can make assumptions around HIV, and sometimes we need to check and make sure we both mean the same thing.
- Relying on casual partners to disclose or even know their HIV status can be risky. Even if they genuinely believe they are HIV negative, they may not have had a recent HIV test.
- It can help to find someone to talk honestly with about sex, risk and taking control (including a GP, counsellor, friends or support networks).
- The NSW Public Health Act says that if you have a sexually transmissible medical condition you must tell your partner before sex. People Living With HIV/AIDS(NSW) has advocated, and continues to advocate, that the law reflect the importance of condoms in reducing the risk of HIV transmission.

We might take risks if we are in love. Is the feeling of the moment affecting our decisions?

It can be helpful to be aware of situations in which you might be likely to take greater risks.



GETTING INFORMATION AND SUPPORT

Positive or negative: HIV is in our lives looks at the learning and practices gay men take on to manage risk. This campaign offers strategies and practical tips on taking back control after a risk event, the subsequent testing for HIV and dealing with a positive diagnosis.

Fact sheet 1 Living with Risk and Taking Control asks: Why do we take risks? How do I manage risk and take control? If I have had unsafe sex what can I do to take back control? And how do I deal with a positive diagnosis?

Fact sheet 2 Positive Sex and Risk asks: What does risk mean after a positive diagnosis? Do boundaries and attitudes to sex change? How do we think or talk about risk?

For more information see www.plwha.org.au or call 9361 6011

- **People Living With HIV/AIDS (NSW) Inc** (02) 9361 6011 Freecall 1800 245 677. A non-profit community organisation representing the interests of people living with HIV/AIDS in New South Wales.
- **Support / discussion groups**
After Hours (for newly diagnosed)
Living Long Term With HIV
Monthly meetings and discussion nights.
Call 9361 6011 or email: admin@plwha.org.au
www.plwha.org.au
- **AIDS Council of New South Wales (ACON)** (02) 9206 2000 Freecall 1800 063 060. A health promotion organisation based in the gay, lesbian, bisexual and transgender communities with a central focus on HIV/AIDS.
www.acon.org.au
- **Positive Living Centre (PLC)** (02) 9699 8756. Provides a range of structured programs, special events and social activities as well as peer support and health promotion programs for people living with HIV/AIDS.
- **PEP (Post-Exposure Prophylaxis)** - call the PEP 24 hour hotline **1800 737 669** or **1800 PEP NOW** for more information and your nearest location.
- **Albion Street Centre Psychology Unit** (02) 9332 9600. Psychology Unit Manager, 9am–7pm, Mon–Fri.
- **Gay and Lesbian Counselling Service of NSW (GLCS)** (02) 8594 9596. Outside of Sydney areas call 1800 18 GLCS or 1800 18 4527. A telephone counselling and information line operates seven days a week from 5.30pm to 10.30pm in the Sydney Metropolitan Area or from outside of NSW.
- **Multicultural HIV/AIDS & Hepatitis C Service** (02) 9515 3098 Freecall 1800 108 098. Mon–Fri, 9am–5pm. Bilingual/bicultural co-workers providing emotional support, advocacy and information to people living with HIV/AIDS from non-English speaking backgrounds.
www.multiculturalhivhepc.net.au
- **For regional NSW HIV/AIDS and related services:** *Contacts: A Directory of Services for people with HIV/AIDS.* Available from People Living With HIV/AIDS (NSW) Inc. (02) 9361 6011, Freecall 1800 245 677 or visit www.plwha.org.au
- **Written Resources (available from ACON, AFAO and PLWHA [NSW]):**
HIV+ Gay Sex: A booklet about being gay, Having HIV and Sex, 2nd Edition, Australian Federation of AIDS Organisations (AFAO)/ National Association of People Living With AIDS (NAPWA), 2002.
Positive Diagnosis: a resource for newly diagnosed people, Australian Federation of AIDS Organisations (AFAO), 2003. www.afao.org.au
Taking care of yourself: a guide for people with HIV/AIDS, 2nd Edition, Australian Federation of AIDS Organisations (AFAO)/ National Association of People Living With AIDS (NAPWA), 2003. www.afao.org.au
Opposites Attract: For HIV negative partners of HIV positive men, 2nd Edition, AIDS Council of NSW (ACON), 2005. www.afao.org.au
PLWHA (NSW) Health Promotion Fact Sheet *10 Dynamics of Disclosure*, 2004 & Fact Sheet *16 Relationship Agreement: Rules of the Heart*, People Living With HIV/AIDS (NSW) 2006
- **Useful website on the basics of HIV transmission and testing**
THE BODY, the complete HIV/AIDS Resource www.thebody.com/

Footnotes

- 1 The material used in this fact sheet was derived from discussion groups with both positive and negative men and a series of one-on-one interviews with guys who had taken PEP. All names have been changed.
- 2 PEP (Post-Exposure Prophylaxis) is a 4-week course of anti-HIV drugs, which may stop HIV infection becoming established if, started within 72 hours after exposure to HIV.



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