Easy Read Edition

A Self-Advocate's Guide to Safer Sex

Words to Know
Words to Know

abortion

When a person decides to end their pregnancy without giving birth. After getting an abortion, a person is not pregnant anymore. (Parts 3, 7)

age of consent

The youngest a person can be and still consent to sex. (Part 8)
AIDS

A disease caused by HIV. People with AIDS can get very sick. (Part 5)

anal sex

When a person puts their penis or a sex toy inside someone else’s anus (butt). (Parts 2, 5, 9)

asexual

Someone who does not have sexual feelings towards anyone else (Part 1)
birth control

Medication that makes it so someone cannot get pregnant as long as they keep taking it. Birth control is also called contraception. (Parts 3, 7, 8)

cells

Tiny living organisms. The human body is made up of cells. (Parts 3, 5)

cervix

An internal body part. The area where the vagina meets the uterus. (Parts 2, 7)
chlamydia

An STI. Many times, people who have chlamydia have no symptoms and do not know they have an STI. Chlamydia can be cured with medication. (Part 4)

circumcision

Having your foreskin removed. (Part 2)

clitoris

An external body part. A body part that helps with sexual pleasure. The clitoris is just above the top of the inner labia. (Part 2)
condoms

Thin sheaths of material that go over the penis or in the vagina or anus (butt). Condoms can prevent pregnancy and STIs. (Parts 3, 4, 5, 8)

consent

Saying yes to something. (Parts 8, 9)

curable

When a disease is curable, you can take medication to get rid of the disease germs completely from your body. (Parts 4, 5)
dental dams

Thin sheets of flexible material, usually made out of rubber latex. You can put a dental dam over the opening of the vagina when you are having mouth-to-vagina or vagina-to-vagina sex. Dental dams can prevent STIs. You can also make dental dams out of a condom or a disposable glove. (Parts 4, 5)

disparity

An unfair difference between two groups. (Part 5)
domestic violence

Abuse that happens within romantic or intimate relationships. (Part 9)

eggs

One of the two types of cells involved in pregnancy. People with vaginas generally make eggs. (Parts 2, 3)

ejaculation

When sperm comes out of a penis. (Part 3)
**external condoms**

Condoms that go over the penis or a sex toy shaped like a penis. External condoms are sometimes called “male” condoms. (Part 3)

**Fallopian tubes**

An internal body part. The body parts that connect the ovaries to the uterus. (Parts 2, 3)

**fertilization**

When an egg and a sperm meet. (Part 3)
fetus

The new human that grows inside a person when the person is pregnant. (Parts 2, 3, 5)

foreskin

An external body part. A piece of skin that surrounds the tip of the penis. (Part 2)

genitals

The parts of your body you use in sex and having children. (Parts 2, 4, 7, 8, 9)
gonorrhea

An STI. Many times, people who have gonorrhea have no symptoms and do not know they have an STI. Gonorrhea can be cured with medication. (Part 4)

hepatitis B

An STI that can hurt your liver. Your liver is an organ in your body. There is no cure for hepatitis B but it can be treated with medication and prevented with a vaccine. (Part 4)
herpes

An STI that causes sores on the genitals. There is no cure for herpes, but it can be treated with medications. (Part 4)

HIV

An STI that makes it hard for your body to fight off germs. HIV cannot be cured, but it can be prevented and treated with medication. (Parts 4, 5)
**HPV**

An STI that causes warts on the genitals. Most types of HPV are harmless and go away on their own, but some types can cause cancer. There is no cure for HPV but it can be prevented with a vaccine. (Part 4)

**hysterectomy**

A kind of sterilization that people with a uterus can get. Hysterectomy is when a doctor removes the uterus completely so that sperm cannot get through to meet with an egg. (Part 3)
**internal condoms**

Condoms that go inside someone’s vagina or rectum (butt). Internal condoms are sometimes called “female” condoms. (Part 3)

**intrauterine device (IUD)**

A small device that goes inside your uterus to prevent pregnancy. (Part 3)

**labia**

An external body part. The fat and tissue around the opening of the vagina. (Part 2)
medication abortion

When a pregnant person takes pills to end their pregnancy. (Part 3)

Mpox

A disease that causes painful sores on your body. Mpox is also called monkeypox. (Part 6)

oral sex

When someone puts their mouth on someone's genitals (sexual body parts), like their penis or vagina. (Parts 2, 4, 5, 8, 9)
ovaries
An internal body part. Where eggs develop inside a person. (Parts 2, 3)

ovulation
When an egg comes out of a person’s ovary and goes into their Fallopian tube. (Part 3)

penis
An external body part. The penis is the part of the body that sperm and urine (pee) come out of. (Parts 2, 3, 4, 5, 7, 9)
**post-exposure prophylaxis**

A medication you take after you were exposed to HIV to prevent you from getting HIV. (Part 5)

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**power imbalance**

When one person has a lot more power than the other (Part 8)
pre-exposure prophylaxis (PrEP)

A medication that can prevent you from getting HIV. You take PrEP every day as a pill or get it as a shot every 2 months. (Parts 5, 8)

prevent

To stop something from happening in the first place. (Parts 3, 4, 5, 6)
salpingectomy

A kind of sterilization that people with Fallopian tubes can get. Salpingectomy is when a doctor removes the Fallopian tubes completely so that sperm cannot get through to meet with an egg. (Part 3)

scrotum

An external body part. The scrotum is a bag made out of skin that holds the testicles. (Part 2)
semen

A bodily fluid that contains sperm. (Parts 2, 3)

sex

Different sexual activities that people can do together. (Parts 1, 2, 3, 4, 5, 6, 7, 8, 9)

sexual and reproductive health care

care to make sure your genitals and reproductive system are healthy. (Parts 7)
sexual assault

Having sex with someone without their consent. (Parts 8, 9)

sexually transmitted infections (STIs)

Germs you can get from having sex. Some people call sexually transmitted infections “sexually transmitted diseases,” or STDs. (Parts 1, 3, 4, 5, 6, 7, 8, 9)

sperm

One of the two types of cells involved in pregnancy. People with penises generally make sperm. (Parts 2, 3)
sterilization

When someone has surgery so they cannot get pregnant or get someone else pregnant anymore. (Part 3)

surgical abortion

When a pregnant person has surgery to end their pregnancy. (Part 3)

syphilis

An STI that causes sores on the genitals and can damage other parts of your body if you do not get it treated. Syphilis can be cured with medication. (Part 4)
testicles

An internal body part. The testicles make sperm. (Part 2)

transmisogyny

Bad treatment of transgender women. (Part 5)

treatable

When a disease is treatable, it means you can take medication to help get rid of the symptoms of that disease. (Parts 4, 5)
tubal ligation

A kind of sterilization that people with Fallopian tubes can get. Tubal ligation is when a doctor cuts or ties the Fallopian tubes so that sperm cannot get through to meet with an egg. (Part 3)

undetectable

When someone with HIV has so little HIV in their blood that an HIV test cannot find it. (Part 5)
untransmittable

When you cannot give HIV to a sexual partner, even if you have sex without condoms or PrEP. (Part 5)

urethra

An internal body part. A tube inside the body that carries urine from the bladder to out of the body. In people with vaginas, the opening of the urethra is part of the vulva, between the opening of the vagina and the clitoris. In people with penises, the urethra also carries semen out of the body, and is located inside the penis. (Part 2)
uterus

An internal body part. The uterus is where a fetus grows when a person is pregnant. (Parts 2, 3)

vaccines

Shots doctors give us to keep us from getting sick. (Parts 4, 6)

vagina

An internal body part. The vagina is where a person who gets a period menstruates or bleeds from and where a baby comes out of during birth. (Parts 2, 3, 4, 5, 7, 9)
vaginal sex

When someone puts their penis or a sex toy inside someone else’s vagina. (Parts 2, 3, 5, 9)

vas deferens

An internal body part. The vas deferens are tubes that carry sperm out of the testicles and up into the body. (Parts 2, 3)
vasectomy

A kind of sterilization that people with a penis can get. Vasectomy is when a doctor cuts or ties the vas deferens (tubes that bring sperm from the testicles to the penis) so that a person cannot ejaculate sperm any more. (Part 3)

vulva

The external (outside) genitals of a person who has a vagina. (Parts 2, 9).
window period

The time between when you might have gotten HIV and when a test can look for HIV. (Part 5)
Easy Read Edition

A Self-Advocate’s Guide to Safer Sex

Part 1: To Start
Part 1: To Start

What is this toolkit about?

This is a toolkit about having sex.

It talks about things like:

- What “having sex” means.
- Why people have sex.
• What some risks of having sex are.

• How to have safer sex.

• What pregnancy is.

• What STIs (including HIV) are.

• How to prevent pregnancy.
- How to prevent STIs.

- What sexual and reproductive health care is, and how to get it.

- What consent is and why it is important.

- What sexual assault is.
These are really important topics for people with intellectual and developmental disabilities (IDD) to know. Adults with IDD can be sexual beings, too.

That means we can:

- Have sex.
- Want to have sex with other people.
- Be in relationships where we have sex with other people.
• Love and care for the people we have sex with.

But a lot of the time, adults with IDD do not get information about sex.

We may be told that we should just never have sex.

We may be told that sex is a bad, dangerous thing.
We may be told that we are “not ready” for sex.

We may be told all of this even if we are adults who can say “yes” to having sex.
Note: Some adults with IDD are asexual.

Asexual people do not have sexual feelings towards anyone else.

It is okay to be asexual!

It is okay not to have sexual feelings towards anyone else.

Some asexual adults like having sex.
Some asexual adults do not like having sex.

You can learn more about being asexual in Definitions and Beyond.
Why do people with IDD not get to learn about having sex?

Here are some reasons why adults with IDD do not get to learn about having sex, and how to have safer sex:

People might think we are not able to have sex.

People may think we are not physically able to have sex.

Or, they may think we are not mentally able to say “yes” to having sex.
This is wrong! Adults with IDD can have sex.

We can say “yes” to having sex.

People see us as permanent children.

People might say we have the “mental age” of a child.

People might say we “do not grow up.”
People then might say that we do not need information about sex because we’re not really adults.

But everyone grows up!

Adults have the mental age of adults, no matter whether they have an IDD or not!

We are not permanent children.

We can and do have sex.
We may not have gotten sex education in school.

Sex education is classes that teach people about their bodies, sex, relationships, and dating.

A lot of the time, students with disabilities do not get sex education.

Sometimes this is because people believe students with disabilities should not get sex education.

Sometimes this is because people believe that no students should get sex education.
We may live in a place where people do not talk about sex openly or at all.

Other people may have taught us that sex is “bad” or “dirty” and not something to talk about.

Other people may have punished us for asking questions about sex.

We may have learned that it is not safe to talk about or ask questions about sex.
Why is it important for people with IDD to learn about sex?

It is still very important that people with IDD learn about sex and having safer sex. Here are a few reasons why it is so important:

**Adults with IDD can be sexual beings.**

We may want to have sex!

We may already be having sex!
We need and deserve information about how to have safer sex.

Information about having safer sex is a human right.

Even if we are asexual or do not want to have sex, we still need information on having safer sex.
If we do not learn about having sex and safer sex, we may have sex in ways that are dangerous.

We may have sex in ways that put us at higher risk for catching diseases.

We may have sex in ways that hurt others or make other people uncomfortable.

We may have sex in ways that are against the law.
People with IDD are more likely to be sexually assaulted.

Sexually assaulted means we are forced to have sex when we do not want to.

Sexual assault is wrong.

Sexual assault can be against the law.

Sexual assault goes against a person’s rights.
Knowing what sex and safer sex are make us less likely to be sexually assaulted.

Knowing what sex and safer sex are means we are more likely to know our rights around sex.
Content Note

This guide will talk about some things that can be upsetting.

It will talk about things like sexual assault, abuse, and violence against people with IDD.

We talk about abuse and violence in the sections “What is consent?” and “What is sexual assault?”

It is okay to take a break if you need to.
It is okay to skip these sections or not read this toolkit if you need to.
Easy Read Edition

A Self-Advocate’s Guide to Safer Sex

Part 2: What is sex? What is safer sex?
Part 2: What is sex? What is safer sex?

The Basics of Sex

“Sex” can mean different things to different people.

In this toolkit, when we say “sex” or “have sex,” we mean sexual activities people can do together.

Some of these sexual activities are:

- Kissing
• Touching someone’s chest or breasts

• Touching someone else’s genitals (sexual body parts), like their penis or vagina, with your fingers

• Using sex toys with someone else

• Someone putting their mouth on someone else’s genitals (sexual body parts), like their penis or vagina. (This is called **oral sex**.)
• Someone putting their penis or a sex toy inside someone else’s vagina (This is called vaginal sex.)

• Someone putting their penis or a sex toy inside someone else’s anus (butt). (This is called anal sex.)

People have sex for many reasons.

People have sex because it feels good.
People have sex because it can make them closer to their sexual partner or partners.

People have sex because they want to get pregnant, or get someone else pregnant.
Safer Sex

There is no such thing as completely safe sex.

All sex has risks.

For example, some kinds of sex have pregnancy as a risk.

Some types of sex have getting sick with certain germs as a risk.
But you can take steps to make sex safer.

You can take steps to avoid risks or make risks smaller.

When you take steps to avoid risks or make risks smaller when having sex, it is called **safer sex**.
Genital: Sexual Body Parts

Everyone has genitals.

**Genitals** are your sexual body parts.

When we say “sexual body parts,” we mean the parts of your body you use in sex and having children.

Most people have either a vagina or a penis.
Most, but not all, girls and women have vaginas.

Most, but not all, boys and men have penises.

A person who has a vagina usually has other sexual parts, such as:

- A clitoris
- A labia
• A uterus

• Fallopian tubes

• Ovaries
A person who has a penis usually has other sexual parts, such as:

- A scrotum
- Testicles (also called testes)
- Vas deferens
- Urethra
We will go over each of these parts in more detail.
The Vagina and Its Parts

Outside Your Body: The Vulva

The **vagina** is an internal (inside) body part.

The vagina is the opening where:

- A person who menstruates (gets a period) menstruates or bleeds from
- A penis goes during penis-in-vagina sex
• A baby comes out of during birth

If you have a vagina, the opening of your vagina is between your legs.

The opening of the vagina is part of the vulva.

The **vulva** is the external (outside) genitals of a person who has a vagina.
The vulva also contains the labia and the clitoris.

The **labia** is the fat and tissue around the opening of the vagina.

The labia is made of two parts: the outer labia and the inner labia.

The inner labia is located inside the outer labia.
The labia helps keep germs out of the vagina.
The clitoris is just above the top of the inner labia.

The **clitoris** is a body part that helps with sexual pleasure.

It can feel really good to touch your clitoris.

Most of your clitoris is located inside your body.

Only the head of the clitoris is located outside your body.
A note on the labia and the clitoris:

Labias and clitorises can come in all different sizes.

Labias and clitorises can come in all different colors.

It is not “weird” or “wrong” to have a labia or clitoris that is bigger than usual.

It is not “weird” or “wrong” to have a labia or clitoris that is smaller than usual.
It is not “weird” or “wrong” if your labia or clitoris is a different color than the rest of your body.

All these things are normal.
Inside Your Body: The Uterus, Fallopian Tubes, and Ovaries

The vagina is an internal body part.

The vagina leads to another body part, the uterus.

The **uterus** is where a fetus grows when a person is pregnant.

(A **fetus** is the new human that grows inside a person when the person is pregnant.)
The area where the vagina meets the uterus is called the **cervix**.

Above the uterus are ovaries.

**Ovaries** are where eggs develop inside a person.

We will talk more about eggs in the section “Pregnancy Basics.”
People who have ovaries usually have 2 ovaries.

Between the ovaries and the uterus are the Fallopian tubes.

The **Fallopian tubes** connect the ovaries to the uterus.

The Fallopian tubes help move eggs from the ovaries to the uterus.
People who have Fallopian tubes usually have 2 Fallopian tubes, one for each ovary.

Note: people with vaginas do **not** urinate (pee) from their vaginas.

People with vaginas urinate from their urethras.

The **urethra** is a tube inside the body that carries urine from the bladder to out of the body.
In people with vaginas, the opening of the urethra is part of the vulva.

The opening of the urethra is between the opening of the vagina and the clitoris.
The Penis and Its Parts

Outside Your Body: The Penis and Scrotum

The penis is an external body part.

If you have a penis, your penis is between your legs.

The penis is the body part that goes inside the vagina during penis-in-vagina sex.

The penis is the part of the body that sperm and urine (pee) come out of.
People who are born with a penis are also born with a foreskin.

A **foreskin** is a piece of skin that surrounds the tip of the penis.

A person can pull their foreskin back to show the tip of their penis.

Some people have their foreskins removed.
Having your foreskin removed is called \textit{circumcision}.

Most people who get circumcised get circumcised when they are very young.

It is normal to have a foreskin on your penis.

It is normal to not have a foreskin on your penis.
A note on penis sizes:

Penises come in all different sizes.

Some penises are longer.

Some penises are shorter.

Some penises are fatter.

Some penises are thinner.
All penis sizes are normal.

All penis sizes are okay.

Having a larger penis does not make you better at sex.

Having a smaller penis does not make you better at sex.
You **cannot** tell a person’s penis size by looking at things like their:

- Height.
- Weight.
- Hand size.
- Foot size.
Under the penis is the **scrotum**.

The scrotum is a bag made out of skin.

The scrotum holds the testicles.

The job of the scrotum is to keep the testicles at the right temperature so the testicles can make sperm.

We will talk more about sperm in the section “Pregnancy Basics.”
On cold days, the scrotum holds the testicles closer to the body.

On hot days, the scrotum holds the testicles farther from the body.

This is so the testicles will be at the right temperature to make sperm.
Inside Your Body: The Testicles, Vas Deferens, and Urethra

Inside the scrotum are the **testicles**.

Most people who have testicles have two testicles.

The testicles make sperm.

We will talk more about what sperm is in the section “Pregnancy Basics.”
The testicles are connected to the vas deferens.

The **vas deferens** are tubes that carry sperm out of the testicles and up into the body.

Inside the body, the sperm mixes with different fluids to form semen.

**Semen** is a bodily fluid that contains sperm.
The vas deferens carry the semen to the urethra.

The urethra is a tube inside the body that carries urine (pee) from the bladder to out of the body.

In people with penises, the urethra also carries semen out of the penis.

In people with penises, the opening of the urethra is at the tip of the penis.
Part 3: What is pregnancy? How can you prevent pregnancy?
Part 3: What is pregnancy? How can you prevent pregnancy?

Pregnancy Basics

When a person is pregnant, they have a new human growing inside them.

People usually get pregnant through having sex.
All human bodies are made of cells.

Cells are tiny living organisms.

Humans produce two special types of cells that are involved in pregnancy: sperm and eggs.

People who have penises generally make sperm.
People who have vaginas generally make eggs.

Most people with vaginas ovulate.

When **ovulation** happens, an egg comes out of a person’s ovary and goes into their Fallopian tube.
Most pregnancies happen through vaginal sex.

During sex, the person with a penis may **ejaculate**, meaning semen comes out of their penis.

The sperm travel up the vagina, into the uterus, and into the Fallopian tube.
If there is an egg in one of the Fallopian tubes, a single sperm cell may meet with it.

This is called **fertilization**.

The egg and the sperm combine to make a single new cell.

This new cell will travel and attach itself to the wall of the uterus.

This cell will start making new cells.
These new cells will eventually become a new human.

The person with the vagina is now pregnant.
Pregnancy Prevention

There are several ways to prevent pregnancy.

When you prevent something, you stop it from happening in the first place.

People want to prevent pregnancy for many reasons.

They may not want to be pregnant or have a child yet.
They may not want to be pregnant or have a child at all.

They may want to have sex without the risk of getting pregnant.

One way to prevent pregnancy is to prevent ovulation.

This happens when a person with a vagina takes medication that stops their ovaries from releasing eggs.
If there is not an egg in the Fallopian tubes, there is nothing for the sperm to fertilize.

The other way to prevent pregnancy is to stop the sperm from getting to the egg.

This often happens through physically blocking the sperm from the egg.
Birth Control

Birth control is medication that makes it so someone cannot get pregnant as long as they keep taking it.

Birth control is also called “contraception.”

There are many different kinds of birth control.

We will talk about some of the most common ones here.
NOTE: All the types of birth control we are going to talk about are only for people with vaginas.

Right now, the only forms of birth control available to people with penises are condoms and sterilization.

We will talk about condoms and sterilization in a later part.
Birth control can come as pills, which you take by mouth.

There are many different kinds of birth control pills.

Pills work by stopping ovulation.

They also work by thickening mucus inside the body to stop sperm from getting to an egg.
Pills are very good at preventing pregnancy.

However, you have to remember to take a pill every day.

If remembering to take pills is hard for you, you might want to choose a different form of birth control.
Shots

Birth control can come as shots you get from a doctor.

The birth control shot is also called Depo-Provera.

The shot works by stopping ovulation.

It also works by thickening mucus inside the body to stop sperm from getting to an egg.
You get the birth control shot every 3 months.

The shot is very good at preventing pregnancy.

However, it does involve getting stuck with a needle.

If you are afraid of needles, you might want a different type of birth control.
**Patches**

Birth control can come as patches that you put on your skin.

The two types of birth control patches are called Xulane and Twirla.

Patches work by stopping ovulation.

They also work by thickening mucus inside the body to stop sperm from getting to an egg.
Patches are very good at preventing pregnancy.

However, you do have to remember to use a new patch each week.

If remembering to use a new patch weekly is hard for you, you might want to choose a different form of birth control.
Implants

Birth control can come as a thin rod that you get implanted into your arm.

The rod is about the size of a matchstick.

The birth control implant is also called Nexplanon.

The implant works by stopping ovulation.
It also works by thickening mucus inside the body to stop sperm from getting to an egg.

Once the implant is in your arm, it lasts for about 5 years.

The implant is very good at preventing pregnancy.
Birth control can come as a small device that goes inside your uterus.

These devices are called **intrauterine devices**, or IUDs.

There are two kinds of IUDs.

One type is the hormonal IUD.

The other type is the copper IUD.
Both types of IUDs work by stopping sperm from getting through the uterus.

But the hormonal IUD also works by stopping ovulation.

Once the IUD is in your uterus, it lasts for 3-12 years.

It depends on the type of IUD.

The IUD is very good at preventing pregnancy.
**Condoms**

Condoms are a good way to help keep you or your partner from getting pregnant.

Condoms can also keep you from getting or giving someone a sexually transmitted infection.

We will talk about what sexually transmitted infections are in the section “What are STIs? How can you prevent STIs?”

Condoms are thin sheaths of material that go over the penis or in the vagina.
Most condoms are made out of rubber latex.

There are also non-latex condoms, if you are allergic to latex or need non-latex condoms.

There are two main types of condoms: external condoms or internal condoms.
External condoms

**External condoms** are condoms that go over the penis.

If you are using a sex toy shaped like a penis, you can also put an external condom over the sex toy.

External condoms are sometimes called “male” condoms.

You can buy external condoms at most drugstores or get them from your doctor.
External condoms come in different sizes.

Different people have different sized penises.

And different people use different sized sex toys.

So it is important that there are different sized condoms for different people.
You might have heard someone say that their penis is “too big” for condoms.

This is not true!

It is true that their penis might have been too big for the condoms they used before.

But there are bigger condoms that would fit their penis.
Internal condoms

**Internal condoms** are condoms that go inside someone’s vagina or rectum (butt).

You can put an internal condom in up to 2 hours before having sex.

Some people prefer internal condoms because they do not have to rely on their partner using an external condom.

Internal condoms are sometimes called “female” condoms.
You can buy internal condoms at some drugstores or get them from your doctor.

Internal condoms come in one size.

Internal condoms are bigger than external condoms.

Internal condoms are generally not made with rubber latex.
So if you or your partner has a latex allergy, internal condoms might be a good idea.

**NOTE:** Only use one condom at a time.

Do not use an internal and external condom at the same time.

Use a new condom for each sexual activity you do.

Do not reuse condoms.
Always throw away condoms in the trash.

Do not flush condoms down the toilet.
Sterilization

**Sterilization** is when someone has surgery so they cannot get pregnant or get someone else pregnant anymore.

There are several types of sterilization.

We will talk about the most common ones here.
**Tubal ligation**

*Tubal ligation* is a kind of sterilization that people with Fallopian tubes can get.

(Remember, most people with vaginas have Fallopian tubes.)

*Tubal ligation* is when a doctor cuts or ties the Fallopian tubes.

Then, sperm cannot get through the Fallopian tubes to meet with an egg.
Then, sperm cannot meet up with an egg and fertilize it.

After tubal ligation, a person still gets a menstrual period.

They just cannot get pregnant.
**Salpingectomy**

Salpingectomy is a kind of sterilization that people with Fallopian tubes can get.

(Remember, most people with vaginas have Fallopian tubes.)

Salpingectomy is when a doctor removes the Fallopian tubes completely.

Then, sperm cannot get through the Fallopian tubes to meet with an egg.
Then, sperm cannot meet up with an egg.

After a salpingectomy, a person still gets a menstrual period.

They just cannot get pregnant.
**Hysterectomy**

Hysterectomy is a kind of sterilization that people with a uterus can get. (Remember, most people with vaginas have uteruses.)

Hysterectomy is when a doctor removes the uterus completely.

Then, sperm cannot get through the uterus to meet up with an egg.
There is also nowhere for a fertilized egg to attach to.

After a hysterectomy, a person does not get a menstrual period anymore.

They also cannot get pregnant.
Vasectomy

Vasectomy is a kind of sterilization that people with a penis can get.

Vasectomy is when a doctor cuts or ties the vas deferens (tubes that bring sperm from the testicles to the penis).

Then, sperm cannot get out of the penis and cause pregnancy.

After a vasectomy, a person can still ejaculate.
But the fluid they ejaculate will not contain sperm.

They cannot get someone else pregnant anymore.
Abortion

When a person is pregnant, they have a new human growing inside of them.

This new human is called a fetus.

An abortion is when a person decides to end their pregnancy without giving birth.

After getting an abortion, a person is not pregnant anymore.
(We say “pregnant people” instead of “women” to include all people who can get pregnant.

Some transgender men and nonbinary people can get pregnant.

Also, not all women can get pregnant.)
There are a couple ways that abortions happen.

One is a *medication abortion*.

This is where a pregnant person takes pills to end their pregnancy.

Another is a *surgical abortion*.

This is when a pregnant person has surgery to end their pregnancy.
You can learn more about abortion in our toolkit “Our Bodies, Our Rights: What’s Going On at the Supreme Court?”
Part 4: What are STIs? How can you prevent STIs?
Part 4: What are STIs? How can you prevent STIs?

Sexually transmitted infections are germs you can get from having sex.

Sexually transmitted infections are also called STIs.

Some people call sexually transmitted infections “sexually transmitted diseases,” or STDs.
What kinds of STIs are there?

Here is a list of some common STIs:

**Chlamydia**

Chlamydia is an STI.

Many times, people who have chlamydia have no symptoms.

They might not know they have an STI.

Chlamydia can be cured with medication.
Gonorrhea

Gonorrhea is an STI.

Many times, people who have gonorrhea have no symptoms.

They might not know they have an STI.

Gonorrhea can be cured with medication.
Herpes

Herpes is an STI that causes sores on the genitals.

The germ that causes herpes is related to the germ that can cause cold sores in your mouth.

There is no cure for herpes.

But herpes can be treated with medications.
Hepatitis B

**Hepatitis B** is an STI that can hurt your liver.

Your liver is an organ in your body.

There is no cure for hepatitis B.

But hepatitis B can be treated with medication.

And hepatitis B can be prevented with a vaccine.
HPV

HPV is an STI that causes warts on the genitals.

Most types of HPV are harmless.

Most types of HPV will go away on their own.

However, some types of HPV can cause cancer.
There is no cure for HPV.

But HPV can be prevented with a vaccine.
Syphilis is an STI that causes sores on the genitals.

Syphilis can cause damage to other parts of your body if you do not get it treated.

Syphilis can be cured with medication.
HIV

HIV is an STI.

It is a germ that makes it hard for your body to fight off other germs.

We will talk more about HIV in Part 5, “What is HIV? What is AIDS? How can you prevent HIV and AIDS?”
There are other STIs but these are the most common.
Prevention of STIs

There are ways to prevent yourself from getting STIs.

The two main ways are:

- Vaccines
- Condoms and Barrier Methods
Vaccines for STIs

There are two STIs that we can stop with a vaccine.

Vaccines are shots.

Doctors give us vaccines to keep us from getting sick.
**HPV**

We can stop HPV with a vaccine.

People usually get the HPV vaccine as teenagers.

But if you did not get the HPV vaccine as a teenager, you might be able to still get it as an adult.

The HPV vaccine is important because it can stop you from getting HPV.
HPV can cause cancer.

So the HPV vaccine can stop you from getting cancer.
Hepatitis B

We can stop hepatitis B with a vaccine.

People usually get the hepatitis B vaccine as babies.

But you can get the hepatitis B vaccine at any age.

The hepatitis B vaccine is important because it can stop you from getting hepatitis B.
Hepatitis B can hurt your liver.

So the hepatitis B vaccine can stop you from getting liver damage.
Condoms and Barriers

Using a condom is a good way to help keep you from getting or giving STIs.

Both internal and external condoms can stop you from getting STIs.

Condoms are a type of barrier.

A barrier is a physical piece of material that can stop you from getting germs that cause STIs.
There are two main types of barriers besides condoms:

- Dental dams
- Gloves
Dental dams are another way to protect yourself against STIs.

Dental dams especially work well if you are having mouth-to-vagina oral sex or vagina-to-vagina sex.

**Dental dams** are thin sheets of flexible material, usually rubber latex.

You put the dental dam over the opening of the vagina.
The dental dam is a barrier between the vagina and the mouth or the other vagina.

Dental dams can stop the germs that cause STIs.

Note: Most dental dams are made out of rubber latex.

If you are allergic to latex, it might be hard to find dental dams without latex.
But you can make a dental dam out of a disposable glove made of a different material, like nitrile.

You can also make a dental dam out of a non-latex condom.

You can read about how to make dental dams out of other barriers in this article on “Do-It-Yourself Dental Dams.”
Gloves

Disposable gloves are another way to protect yourself against STIs.

Disposable gloves are gloves you can throw away after using them once.

Disposable gloves are usually made out of nitrile, a thin, flexible material.

You can use disposable gloves if you are having fingers-to-genitals sex.
Disposable gloves are a barrier between the fingers and the genitals.
Testing for STIs

You can get tested for STIs.

When you get tested for STIs, you get checked for the germs that cause STIs.
You should generally get tested for STIs:

- About once per year if you are having sex, especially if you do not use condoms or other barriers
- If you find out someone you had sex with has an STI
- Before having sex with a new partner
- If you have symptoms of an STI
Here are some common symptoms of STIs:

- Sores in or on your genitals (sexual body parts), thighs, or butt

- Bumps or rashes in or on your genitals (sexual body parts), thighs, or butt

- Bad-smelling or weirdly colored fluid coming out of your vagina or penis

- Burning when you urinate (pee)
- Having to urinate a lot
- Itching in your genitals
- Burning in your genitals
- Pain in your genitals
Remember, a lot of STIs have no symptoms.

So it is important to get tested for STIs even if you have no symptoms.

Here is a quiz that can tell you if you should get tested for STIs.
How can I get tested for STIs?

You can get STI testing from your doctor or health care provider.

You can also get STI testing from a sexual health clinic, like Planned Parenthood.

There are different ways you can be tested for STIs.
Some ways you can be tested for STIs are:

- Giving a blood or urine sample. Then, your health care provider will check for STI germs in your blood or urine.

- If you have sores, bumps, or rashes, getting these things swabbed down with a special cotton swab. Then, your health care provider will check for STI germs in the material from your sores, bumps, or rashes.

- Having a physical exam where your doctor looks at your genitals and checks for anything not normal.
• Having your doctor use a special cotton swab to swab down your genitals. Then, your health care provider will check for STI germs in the material from your genitals.
What if I find out I have an STI?

First, take a deep breath.

STIs are very common.

Many, many, many people who have sex get STIs.

You are not a bad person for having an STI.
You are not “dirty” or “wrong” for having an STI.

If you have an STI, you will probably need to take medication to cure or treat the STI.

(We talk more about what curing or treating STIs means in the next section, “Treatment of STIs.”)

Take the medication exactly as your doctor or health care provider tells you to.
Do not skip doses of the medication.

Do not stop taking the medication just because you feel better.

If you have an STI, you will also need to tell your sexual partner or partners about it.

This can be a hard conversation to have.
Here are some tips from Planned Parenthood about how to tell your partner you have an STI:

*Try to stay calm.*

This is a hard conversation, but it’s a conversation you need to have.

If you go into the conversation with a calm, positive attitude, your partner is more likely to react well.
Remember that STIs are a health problem, not a reflection of who you are as a person.

Having an STI does not make you “dirty.”

It does not make you a bad person.

Millions of people around the world have STIs.

Many of them are in healthy, loving sexual relationships.
It is still possible to have a good sexual relationship if you have an STI.

It is still possible to have safer sex if you have an STI.

_Talk about the facts._

A lot of people do not know the facts about STIs.

A lot of people do not know that STIs can be treated or cured.
Your partner or partners may not know much about STIs.

You can tell them the facts about STIs. If you need help learning the facts about the STI you have, talk to your doctor or health care provider.

Your doctor or health care provider can give you information on the STI you have.

You can also check out Planned Parenthood’s information on STIs.
Have the conversation at the right time.

Pick a time to talk when both you and your partner or partners are free.

(If you have more than one partner, you might consider having separate conversations with each partner.)

Pick a time where you and your partner or partners can focus on the conversation.

Do not try to tell your partner or partners when they are really busy.
Tell your partner or partners in a place that is private and relaxed.

Do not tell your partner or partners in a place where lots of other people can overhear.

If you can, try to have the conversation in person.

It can be hard for some people to hear this kind of news over phone calls, text messages, or video calls.
But there might also be reasons that you cannot tell your partner or partners in person.

So you can also tell them over phone calls, text messages, or video calls.

*Try not to play the blame game.*

Having an STI does not automatically mean you cheated on your partner or partners.

(Cheating on a partner means having sex with someone else without your partner saying yes first.)
Lots of STIs can take a while to show symptoms.

Some STIs can take years to show symptoms!

It is possible to have an STI during your entire relationship with your partner or partners and not know it.

Try not to let the conversation turn into you and your partner or partners blaming each other.
Blaming each other will not help the situation.

The best thing you all can do in this situation is get tested, and get treatment if you need to.

*Think about your safety first.*

Sometimes, our partners hurt us.

Sometimes, our partners make us scared of them.
This is not okay!

Our partners should never hurt us.

Our partners should never make us scared of them.

But this still sometimes happens.
You might be in a relationship where you are scared your partner will hurt you if you say you have an STI.

In this case, it is a good idea to **not** talk to your partner in person.

Tell your partner over a phone call, text message, or video call.

If you can, find somewhere else to stay, like with friends or family, when you tell your partner.
This makes it less of a risk that your partner will hurt you.

If you are worried about your partner hurting you, know that you are not alone.

There are resources that can help you.

You can read more about these resources in Part 9, “What is Sexual Assault?”
Script for telling your partner or partners you have an STI.

Here is a script for telling your partner or partners that you have an STI.

“I need to talk to you about something important.

I went to the [doctor/health clinic] and had some testing done.

I found out I have a sexually transmitted infection, or STI.
The STI I have is called [name of STI].

Because we have had sex, it’s possible that you also have [name of STI].

You should also get tested for STIs.

Getting tested is the only way you will know if you have [name of STI].

Do you have any questions for me?”
Treatment of STIs

Some STIs are **curable**.

That means you can take medications to get completely rid of the germ that causes them.

After you take the medication, there are none of the STI germs left inside your body.

Other STIs are not curable.
There are no medications to completely get rid of the germs that cause them.

But these STIs are still treatable.

That means you can take medications to help get rid of the symptoms of those STIs.

Treatment medications can also keep your body from making more copies of the germs that cause the STIs.
A Self-Advocate’s Guide to Safer Sex

Part 5: What is HIV? What is AIDS? How can you prevent HIV and AIDS?
Part 5: What is HIV? What is AIDS? How can you prevent HIV and AIDS?

**HIV** is a germ that makes it hard for your body to fight other germs. HIV kills off the parts of your body that fight off germs.

This can make it very easy to get sick.

Without treatment, people with HIV often get sick with diseases that people without HIV can fight off easily. Without treatment, people with HIV can easily die of diseases that do not make people without HIV very sick.
How can you get HIV?

HIV is an STI.

That means you can get HIV through having sex.

There are other ways you can get HIV.

Here are some other ways that you can get HIV:
Sharing Needles

By sharing needles, syringes, and other injection supplies with other people who have HIV if you inject drugs. This most often happens with people who inject drugs for fun, like heroin.

But it can also happen if you share needles, syringes, and other supplies for injecting prescription drugs as well.
During Pregnancy

Pregnant people who have HIV can give HIV to their fetus if they are not on HIV medication.

(Fetus is what we call the new human growing inside a pregnant person.)

While Breastfeeding

Breastfeeding people who have HIV can give HIV to their babies if they are not on medication.
Needlesticks in Health Care Settings

Health care workers can sometimes get HIV if they get body fluids from someone with HIV in them. For example, a nurse could get accidentally stuck with a needle that has blood from a person with HIV on it. The nurse could get HIV from the needlestick.

You need to have some kind of contact (such as sexual contact or sharing needles) with someone with HIV to get HIV.

You cannot get HIV from someone who does not have HIV.
HIV does not just happen from certain kinds of contact unless one person has HIV.

You cannot get HIV through these activities:

- Through insect bites (like mosquito bites)
- Through spitting, crying, or sweating
- Through hugging
• Through shaking hands

• Through sharing items like toilet seats or dishes

• Through eating food that someone with HIV cooked

• Through touching someone

• Through the air
What is AIDS?

**AIDS** is a disease caused by HIV.

When HIV gets inside your body, the HIV germs kill off certain cells in your body.

(Remember, cells are tiny living organisms that make up your body.)

These cells are called CD4 cells.
CD4 cells help your body fight off germs.

If a person with HIV does not get proper medication and treatment, the HIV germs will keep killing off CD4 cells.

If a person’s CD4 cell count gets too low, the person can get very sick.

If a person has HIV and their CD4 cell count gets too low, that person has AIDS.
People with AIDS can get very sick.

Not everyone with HIV has AIDS.

People with HIV can take medication to stop themselves from getting AIDS.

The best way to prevent HIV from causing AIDS is to test for HIV.

That way, if someone has HIV, they will know they have HIV.
Then, they can get medication to stop them from getting AIDS.
Who is most at risk?

Your risk of getting HIV is different for different kinds of sex.

HIV is most likely to spread through anal sex.

Anal sex is when one person puts their penis inside another person’s rectum (butt).

HIV can also spread through vaginal sex (where one person puts their penis inside another person’s vagina).
HIV can also spread through oral sex.

Oral sex is where one person puts their mouth on another person’s penis, vagina, or anus (butt).

But it is very rare for someone to get HIV through oral sex.
Health disparities and HIV

Anyone can get HIV, no matter their:

- Sexuality.
- Gender.
- Race/ethnicity.
- Age.
Certain groups are more likely to get HIV than other groups.

Men who have sex with men are more likely to get HIV than men who have sex with women.

Transgender women are also more likely to get HIV than cisgender women.

Black people and Latinx people are more likely to get HIV than white people.
Sometimes, this is because of disparities in health care.

A **disparity** is an unfair difference between two groups.

A lot of groups of people that are more likely to get HIV have worse access to health care.

That means people in these groups are less likely to have access to medications that can prevent HIV, like PrEP.
(We talk about PrEP in a later section.)

People in these groups are less likely to have access to testing for HIV.

People in these groups are less likely to be taking medication for their HIV if they have HIV.

All these things are unfair!
Everyone should have good access to health care.

Everyone should have good access to HIV prevention, testing, and treatment.

Other times, this is because of other kinds of disparities.

For example, transgender women are more likely to be poor or not have a job than cisgender women.
This is because of transphobia and transmisogyny.

Transmisogyny is bad treatment of transgender women.

Transgender women who are poor or do not have a job are more likely to have sex with people to earn money.

People who have sex to earn money are more likely to get HIV.
So, transgender women who have sex to earn money are more likely to get HIV.

This is unfair!

Transgender women should not have to deal with transphobia and transmisogyny.

People who have sex to earn money should not be more likely to get HIV.
Testing

You can get tested for HIV, just like you can for other STIs. You can get tested for HIV in the following places:

- A doctor’s office.
- A health office or health clinic.
- At home, using a self-test.
HIV tests look for signs of HIV in your body fluids.

Most HIV tests involve taking a blood sample to look for HIV in your blood.

Some self-tests take a saliva (spit) sample to look for HIV in your saliva (spit).

HIV tests cannot look for HIV right after you might have gotten HIV.
All HIV tests have a **window period**.

A window period is the time between when you might have gotten HIV and when a test can look for HIV.

Window periods for different HIV tests can range from 10 days to 90 days.

It depends on the test.
Prevention

Using a condom or other barrier method is a good way to help prevent HIV and other STIs.

Both internal and external condoms can help prevent you from getting or giving someone HIV.

Dental dams and gloves can also help prevent you from getting or giving someone HIV.
There are also medications that can help prevent you from getting HIV.

We will talk about them more in the next section.

**PrEP and PEP**

There are two medications that can prevent you from getting HIV.

They are PrEP and PEP.
**PrEP**

PrEP is short for “pre-exposure prophylaxis.”

“Prophylaxis” means “prevention.”

“Pre-exposure” means “before you are exposed” to HIV.

PrEP is a medication you take everyday to prevent getting HIV.
PrEP can make your chance of getting HIV smaller, even if you do not use condoms.

Here are some reasons why people use PrEP:

• They have a sexual partner who has HIV.

• They have multiple sexual partners and do not know all of their partners’ HIV status.
• They have gotten another STI in the recent past.

• They do not use condoms during sex.

• They have used PEP multiple times in the past. We will talk about what PEP is in the next section.
PrEP comes in two forms: pills and shots.

You can take PrEP as a daily pill.

You can also take PrEP as a shot you get every 2 months.

Both ways reduce your risk of getting HIV.

Both ways work well to keep you safer when you have sex.
If you are interested in PrEP, talk to your doctor.

Your doctor can write you a prescription for PrEP.
PEP is short for “post-exposure prophylaxis.”

“Prophylaxis” means “prevention.”

“Post-exposure” means “after you are exposed” to HIV.

PEP can make your chance of getting HIV smaller.

You take PEP after you might have been exposed to HIV.
Some ways you might be exposed to HIV are:

- You have sex with someone you find out has HIV.
- You are having sex with someone who you are not sure has HIV and your condom breaks.
- You were sexually assaulted. Sexually assaulted means you were forced to have sex with someone.
You need to start PEP within 72 hours (3 days) of when you might have been exposed to HIV.

Otherwise, PEP will not work.

You can get PEP from your doctor.

You can also get PEP from an urgent care or emergency room doctor.
PEP comes as pills.

You need to take the pills exactly as you are told for 28 days.

If you do not take the pills correctly, they will not work correctly.

Then, your risk for getting HIV is higher.

If you take PEP correctly for the entire 28 days, your risk of getting HIV is very small.
You should not use PEP as your main way of preventing HIV.

If you have to take multiple courses of PEP, talk to your doctor about PrEP instead.
Treatment

There is no cure for HIV.

But if you have HIV, you can get treatment.

This treatment can keep you from getting sick with AIDS.

This treatment can keep you from giving HIV to other people, like sexual partners.

This treatment is medications, either as pills or shots.
What does undetectable = untransmittable (U=U) mean?

HIV tests work by looking for HIV in your blood.

Taking medication for HIV can reduce the amount of HIV germs in your blood.

When you have very, very little HIV in your blood, the test cannot find it.

This is called being undetectable.
If the amount of HIV in your blood is undetectable, you cannot give HIV to a sexual partner, even if you have sex without condoms or PrEP.

This is called being **untransmittable**.

When people say “undetectable = untransmittable,” they mean if the amount of HIV in your blood is low enough, you cannot give HIV to a sexual partner.
Part 6: What is Mpox? How can you prevent Mpox?
Part 6: What is Mpox? How can you prevent Mpox?

Mpx (also called monkeypox) is a disease.

It causes painful sores on your body.

Mpx spreads through touching the sores of someone who already has mpx.

This can happen during sex because during sex, people are usually naked and touching each other a lot.
Because mpox can spread during sex, some people say mpox is an STI.

Other people say that mpox is not an STI because mpox can spread in other ways.
In 2022 and 2023, there were a lot of mpox cases all around the world.

A lot of these cases were in LGBTQ+ people, especially gay, bisexual, and queer men.

Mpox affected LGBTQ+ people a lot more than it affected non-LGBTQ+ people.

But it is important to remember that mpox can affect anyone.
Anyone can get mpox.

There is a vaccine for mpox.

The vaccine can stop you from getting mpox.

The vaccine is very good at stopping you from getting mpox.

If you are at high risk of getting mpox, you should think about getting the mpox vaccine.
A Self-Advocate’s Guide to Safer Sex

Part 7: Getting sexual and reproductive health care
Part 7: Getting sexual and reproductive health care

Sexual health care is health care to make sure your genitals (sexual body parts) are healthy.

Reproductive health care is health care to make sure your reproductive system (the parts of your body involved in pregnancy) is healthy.

We will call sexual health care and reproductive health care “sexual and reproductive health care” for short.
Sexual and reproductive health care is important.

It is important to make sure your genitals are healthy.

It is important to make sure your reproductive system is healthy.

These things are important to having a healthy sex life.
Some kinds of sexual and reproductive health care are:

- Getting tested and treated for sexually transmitted infections.
- Getting condoms and birth control.
- Getting health care during pregnancy (sometimes called prenatal care).
- Getting an abortion.
• Getting health care after giving birth (sometimes called antenatal care).

• Getting a mammogram. A mammogram is a test that looks for cancer in your breasts.

• Getting a Pap smear. A Pap smear is a test that looks for cancer in your vagina and cervix.

• Getting health care to help you become pregnant (sometimes called assisted reproductive technologies, or ART).
Different types of doctors can give sexual and reproductive health care.

Sometimes, your primary care doctor (the doctor you see for general health care) can provide sexual and reproductive health care.

Other times, you will have to see a different doctor.
There are two main types of doctors that deal with sexual and reproductive health care.

- The first are obstetrician-gynecologists. Obstetrician-gynecologists are also called OBGYNs. OBGYNs mainly care for people who have vaginas.

- The second is urologists. Urologists mainly care for people who have penises.
If you need to see an OBGYN or urologist, talk to your primary care doctor.

Your primary care doctor can send you to an OBGYN or urologist.

Or, depending on what care you need, your primary care doctor may be able to give you the care.
If you are transgender or nonbinary, you will want to find an OBGYN or urologist who knows how to care for transgender and nonbinary patients.

There are a few ways you can do this.

If you already have a referral to a doctor, you can call their office and ask if the doctor knows how to care for transgender and nonbinary patients.
You can ask questions like:

- Has this doctor cared for transgender or nonbinary patients before?

- Does this doctor have any training in caring for transgender and nonbinary patients?

- Can this doctor care for me if I am on hormone replacement therapy? Or, can this doctor care for me if I have had transition-related surgery?
If you are getting transition-related health care through a clinic, you can ask the clinic for a referral to an OBGYN or urologist.

Often, transition-related health care clinics have names of OBGYNs and urologists who work with transgender and nonbinary patients.

You can go to a sexual health clinic or an LGBTQ+-specific clinic.

Sexual health clinics only provide sexual and reproductive health care.
LGBTQ+-specific clinics provide health care designed for LGBTQ+ people.

One example of a sexual health clinic is Planned Parenthood.

Planned Parenthood is a network of sexual health clinics all around the US.

Many Planned Parenthood clinics can provide transition-related health care, like hormones, and OBGYN or urology care.
Easy Read Edition

A Self-Advocate’s Guide to Safer Sex

Part 8: What is consent?
Part 8: What is consent?

Consent is about saying yes to something.

Consent can happen in a lot of cases.

For example, if you were to get surgery, you might have to sign a form saying that you want to have the surgery.

When you sign that form, you are giving consent to have the surgery.
Consent is really important when you have sex with someone. You need to make sure of two things:

- That the person is able to give consent
- That the person does give consent freely

These things are both really important to give consent. We will go over each of them separately.
Ability to give consent

Before you ask someone if they want to have sex, you need to make sure they can consent to sex.

In order to be able to consent, the person needs to be:

1. Older than the age of consent.

The age of consent is the youngest a person can be and still consent to sex.
People who are younger than the age of consent cannot consent to sex.

In some states, the age of consent is 16 years old.
In some states, the age of consent is 17 years old.
In some states, the age of consent is 18 years old.

People who have young sexual partners need to know the age of consent where they live, where their partners live, and where they want to have sex.
If someone has sex with a person who is younger than the age of consent in any of these places, there can be serious legal problems.

2. Awake and alert.

People who are asleep or drowsy cannot consent to sex.
3. Sober (not drunk or high).

People who are drunk or high from using drugs cannot consent to sex.

4. Able to communicate what they want and do not want to happen during sex.

People who cannot communicate what they want during sex cannot consent to sex.
This does not mean a person who cannot speak is always unable to consent to sex.

That person could consent by nodding their head, pointing to what they want, or by using an AAC system.

But in order to consent, a person needs to be able to communicate what they do and do not want.

If the person meets all four of these points, they may be able to consent to sex.
Power and consent

Sometimes, a person might meet all four of these points.

But they still might not be able to consent because of a power imbalance.

A power imbalance is when one person has a lot more power than the other.

When one person has a lot more power than the other person, the person without much power might feel like they must say yes to the person who has a lot of power.
They might feel like if they do not say yes, they will get in trouble.

In these cases, the power imbalance means that the person without as much power cannot freely say no.

For example:

Jessica works in an office.

Lukas is her boss.
Lukas asks Jessica if she will have sex with him.

Jessica does not want to have sex with Lukas.

But Jessica feels like if she says no, Lukas will make her lose her job.

In this situation, Jessica cannot freely say no to sex with Lukas.

Lukas has too much power over Jessica.
Here is another example:

Manuel has a disability.

He goes to physical therapy.

Manuel’s physical therapist, Laura, asks if Manuel will go on a date with her.

Manuel does not want to go on a date with Laura.
But Manuel feels like if he says no to Laura, he will not be able to come back to physical therapy.

In this situation, Manuel cannot freely say no to going on a date with Laura.

Laura has too much power over Manuel.
Giving consent freely

People have the right to choose whether they have sex. They have to be able to choose for themselves whether they say yes or no.

No one should try to make another person say yes to sex.

No one should try to stop consenting adults who want to have sex.

The legal definition of consent will be different from state-to-state.
It is important for people to know what the legal definition of consent is in their state.

But consent should not just be about what is legal to do.

Consent should also be about what is moral and right to do.

Consent should be about respecting yourself and your partner or partners.
One way to make sure you are respecting your partner or partners is to follow the FRIES acronym.

FRIES stands for:

**Freely given**

When you give consent, you choose for yourself whether you want to consent.

Nobody else should choose for you.

Nobody else should pressure you into making a choice.
Reversible

You can always change your mind about consent.

If someone has already said yes, they can always say no and stop whatever they are doing.
Informed

You have to know what you are consenting to.

For example, if your partner wants to have oral sex, they should ask you if you want to do oral sex.

Informed also means knowing the risks of having sex and how to make those risks smaller.

For example, if pregnancy is a risk of having sex and you do not want to get pregnant, you could use condoms or birth control to make the risk smaller.
Enthusiastic

You should only consent to things you really want to do.

If you do not want to do something or are not sure you want to do it, you do not have to consent.

Someone not saying “no” with mouth words does not mean they say “yes.”

People can say or mean “no” in a lot of different ways.
Some ways a person could say or show that they do not consent are:

- Saying “no” or “I do not want to” with their mouth or with AAC.
- Signing or gesturing “no,” like shaking their head.
- Freezing up or going quiet if they had been talking before
• Saying or signing “I am uncomfortable.”

Only “yes” means “yes” when it comes to consent.

**Specific**

You should give (and get) consent for each specific sexual act that you do.

For example, your partner might give consent to kiss you.
But if you want to move on to touching each other naked, you need to ask for consent again.

The FRIES model of consent was adapted from Planned Parenthood.

Consent is not only asking yes or no questions.

Consent is making sure you know your partner’s needs and they know yours.
For example, while you are touching your partner’s genitals, you might ask them if they want you to go faster or slower.

Think of consent as a conversation between the people having sex.

A conversation does not have to just be yes or no questions.

A conversation can also have other kinds of questions and other details.
You can also use nonverbal signals to tell your partners your needs.

For example, before you start having sex you might agree that squeezing each other’s hand is a signal to stop and check in with each other.
To make sure a person consents, you need to make sure of two things:

- That the person said “yes”

- That the person’s “yes” followed all the parts of the FRIES acronym. The person’s “yes” must be freely given, reversible, informed, enthusiastic, and specific.
Things you should never do to get consent

There are some things you should never do to get consent from someone.

The next examples in this section can be really hard to read.

They can especially be hard to read if you have been sexually assaulted (forced to have sex without consent) in the past.

We are including these examples because we want people to know what they should never do to get consent.
But you do not have to read these examples if you do not want to.

You can always skip the examples.

You can always take a break and come back to this section.
You should never lie to someone to get their consent

You need to tell the truth about what kinds of sex you want to have with the other person or people.

You need to make sure the other person or people know what kinds of sex they are agreeing to have.
You and your sexual partner or partners need to tell the truth about things like:

- What kinds of sex you want to have

- What kinds of things you will do to have safer sex, like whether you are on birth control or PrEP. Or, whether you will wear a condom during sex.

- Whether you have any STIs that you could give to your partner or partners through sex.
For example:

James wants to have sex with his girlfriend, Matilda.

James does not like wearing condoms while they have sex, but Matilda wants him to.

So James lies and says he will wear a condom.

Then, while they are having sex, he takes the condom off.
This is not okay!

James lied to get Matilda’s consent.

Matilda thought she was consenting to having sex with James wearing a condom.
You should never threaten someone to get them to have sex with you

Threatening someone means telling them you will hurt them if they do not do something.

It is not okay to threaten people ever.

But it is especially not okay to threaten someone to get them to have sex with you.
For example:

Larry wants to have sex with his boyfriend, Sal.

But Sal does not want to have sex.

So Larry says, “If you do not have sex with me, I will hit you.”

Sal has sex with Larry even though he does not want to because Sal is afraid of being hit.
This is not okay! Larry threatened Sal into having sex.

Sal did not want to have sex with Larry.
You should never pressure someone into having sex

Pressuring someone means annoying or bothering them until they do what you want.

Sometimes, people will pressure their partners to say “yes” to sex after the partner has said “no.”

This is not okay.

If someone says no to sex, you need to respect that.
You should not try to get them to change their mind.

For example:

Lucia wants to have sex with her girlfriend, Isabel.

But Isabel does not want to have sex with Lucia.

So Lucia tries to pressure Isabel into having sex by saying “Come on, please, just this once, it will be okay.”
Isabel gets tired of hearing Lucia pressure her, so she agrees to have sex with Lucia.

This is not okay!

Lucia was pressuring and bothering Isabel until she said yes to having sex.

Even though Isabel said yes to having sex, it was not really consent.
You should never insult or call someone names to get them to have sex with you

Insulting someone means making mean comments about who they are.

You should not insult people in general.

Insulting people is mean and rude.

But it is especially not okay to insult someone to get them to have sex with you.
For example:

Kai wants to have sex with their partner, Taylor.

But Taylor does not want to have sex with Kai.

So Kai makes fun of Taylor by calling Taylor a “big baby who needs to grow up.”

Taylor gets tired of Kai calling them names, so they agree to have sex with Kai.
This is not okay!

Kai was insulting Taylor and calling them names until they said yes to having sex.

Even though Taylor said yes to having sex, it was not really consent.
You should never bribe someone into having sex with you.

Bribing someone means offering them a reward to get them to do something they do not want to do.

Bribing someone is generally a bad thing.

But bribing someone to have sex with you is always a bad thing.
For example:

Noah wants to have sex with his girlfriend, Pricilla.

But Pricilla does not want to have sex with Noah.

So Noah says “if you have sex with me, I will buy you a nice dinner tonight.”

Pricilla agrees to have sex with Noah because she wants the dinner, even though she does not really want to have sex.
This is not okay!

Noah bribed Pricilla into having sex by offering her dinner.

Even though Pricilla said yes to having sex, it was not really consent.
You should never force someone to have sex with you

You should never use physical force to make someone have sex with you.

Physical force can be things like:

- Pushing someone down
- Holding someone down
- Hitting or kicking someone if they try to get away from you
For example:

Norman wants to have sex with his partner, Sarah.

But Sarah does not want to have sex with Norman.

So Norman pushes Sarah down on the bed.

He takes her clothes off.
Then he has sex with her.

This is not okay!

Sarah did not consent to having sex with Norman.

Norman forced Sarah to have sex with him.
If you do any of these things to get someone to have sex with you, it is not consent.

Sex without consent is called sexual assault.
Part 9: What is sexual assault?
Part 9: What is sexual assault?

Having sex with someone without their consent is wrong.

Having consent with someone without their consent is called sexual assault.

Some types of sexual assault are also called rape.

Many types of sexual assault are against the law.
But all sexual assault is morally wrong.

All sexual assault goes against respecting your partner or partners.

Even if a type of sexual assault is not legally wrong, it is still wrong to sexually assault someone.
What can sexual assault look like?

Sexual assault is any kind of sexual activity done without consent.

Remember, sexual activities can include:

- Kissing
- Touching someone’s chest or breasts
• Touching someone else’s genitals (sexual body parts), like their penis or vagina, with your fingers

• Using sex toys with someone else

• Someone putting their mouth on someone else’s genitals (sexual body parts), like their penis or vagina. (This is called oral sex.)

• Someone putting their penis or a sex toy inside someone else’s vagina (This is called vaginal sex.)
• Someone putting their penis or a sex toy inside someone else’s anus (butt). (This is called anal sex.)

Any of these things can be sexual assault, if someone does them to you without your consent.

Some people say it is only sexual assault if someone else puts their penis or a sex toy in you without your consent.

This is wrong.
Sexual assault is any sexual activity a person does without consent.

Sexual assault does not have to involve a penis or a sex toy.
The next few examples can be really hard to read.

They can especially be hard to read if you have been sexually assaulted in the past.

We are including these examples because we want people to know what sexual assault can look like.

But you do not have to read these examples if you do not want to.
You can always skip the examples.

You can always take a break and come back to this section.
Here are some examples of sexual assault:

**Example 1: William and Janice**

Janice went to a party and fell asleep on the couch.

While Janice was asleep, William sat on the couch next to her.

William put his hands up Janice’s shirt and touched her breasts.
William opened Janice’s mouth and put his penis inside Janice’s mouth.

This is sexual assault.

Janice could not consent because she was asleep.

William sexually assaulted Janice when he touched her breasts without consent.

William sexually assaulted Janice when he put his penis in her mouth without consent.
Example 2: Nathaniel and Toby

Toby has a physical disability.

Toby’s disability makes it hard for him to get dressed on his own.

Toby's support worker, Nathaniel, helps Toby get dressed.

One day, when Nathaniel was helping Toby get dressed, Nathaniel grabbed Toby’s penis.
Nathaniel touched Toby’s penis until it got hard and stiff.

Nathaniel did not ask Toby if he could touch Toby’s penis.

And Nathaniel is Toby’s support worker. Nathaniel has power over Toby.

This is sexual assault.

Toby did not consent to Nathaniel touching his penis.
Toby couldn’t consent to Nathaniel touching his penis.

Nathaniel sexually assaulted Toby when he touched Toby’s penis without consent.
Example 3: Greta and Fatima

Greta and Fatima are girlfriends.

Greta wanted to have sex with Fatima.

But Fatima did not want to have sex.

Fatima told Greta “no, I do not want to have sex with you.”
So Greta forced Fatima to have sex with her.

Greta forced Fatima to lick Greta’s vulva.

Greta put her hand on Fatima’s head to force Fatima to keep licking her vulva.

This is sexual assault.

Fatima did not consent to sex with Greta.
Fatima told Greta “No, I do not want to have sex with you.”

Greta sexually assaulted Fatima when she made Fatima lick her vulva without consent.
Example 4: Molly and Quentin

Molly and Quentin are dating.

Molly wanted to have sex with Quentin.

Quentin did not want to have sex with Molly.

Quentin got really scared.

He couldn’t talk or say anything to stop Molly.
Quentin’s penis got hard and stiff because he was scared.

Molly saw this.

She still wanted to have sex with Quentin.

So Molly pushed Quentin down on the bed.

She took his pants and underpants off.
Then she sat down on his penis and put it in her vagina.

This is sexual assault.

Quentin did not consent to having sex with Molly.

Molly sexually assaulted Quentin when she put his penis in her vagina without his consent.
What if I have been sexually assaulted?

If you have been sexually assaulted, remember that it is never your fault.

You did not deserve this.

You did not do anything to “encourage” the person who sexually assaulted you.

You did not do anything wrong.
The only person who did something wrong was the person who sexually assaulted you.

If you have been sexually assaulted, you can read our toolkit about sexual assault.

That toolkit has lots of information on getting support after sexual assault.
That toolkit talks about things like:

- Getting medical care after sexual assault
- Reporting sexual assault to the police
- Getting mental health care after sexual assault
- Safety after a sexual assault
• Long-term healing after sexual assault

• Resources for people who have been sexually assaulted.
Resources for people who have been sexually assaulted

Here are some resources that can help you if you have been sexually assaulted.

Most of these resources are national, meaning they serve the whole United States.

But you can also look for resources within your state or area.

You can do a web search to find resources in your state or area.
Some terms you can search for are:

- “[your state name] coalition against sexual assault”

- “[your city or area] sexual assault resource center”

- “[your city or area] rape crisis center”

- “[your city or area] domestic violence shelter”
The Rape, Abuse, and Incest National Network (RAINN) is one resource for people who have been sexually assaulted.

RAINN has a phone hotline you can call.

The RAINN hotline number is 1-800-656-4673.

You can also contact RAINN through their online chat.
RAINN can help you find sexual assault resources in your state or area.

Los recursos y servicios también están disponibles en español.
National Domestic Violence Hotline

The National Domestic Violence Hotline is another resource for people who have been sexually assaulted by a romantic partner.

Domestic violence is abuse that happens within close relationships, like romantic or intimate relationships.

Domestic violence includes sexual assault.
But domestic violence can also include:

- Physical abuse, like hitting and kicking you
- Emotional abuse, like shouting at you or calling you mean names
- Neglect, like ignoring your needs or not paying attention to you when you need help
• Threats, like threatening to leave you or threatening to put you under guardianship if you do not do what they want

• Financial (money) abuse, like saying that they need to control your money or them taking your paycheck or benefits check

The National Domestic Violence Hotline has a phone hotline you can call.

The National Domestic Violence Hotline number is 1-800-799-7233 (TTY 1-800-787-3224).
You can also contact the National Domestic Violence Hotline through their online chat. (Scroll down on the homepage until you see the button labeled “Chat live now.”)

Or, you can contact the National Domestic Violence Hotline by texting START to 88788.

The National Domestic Violence Hotline can help you find domestic violence resources in your state or area.

Los recursos y servicios también están disponibles en español.
Love is Respect is another resource for people who have been sexually assaulted by a romantic partner or been through domestic violence.

Love is Respect is for young people ages 13 to 26.

Love is Respect has a phone hotline you can call.

The Love is Respect hotline number is 1-866-331-9474 (TTY 1-800-787-3224).
You can also contact Love is Respect through their online chat. (Scroll down on the homepage until you see the button labeled “Chat live now.”)

Or, you can contact Love is Respect by texting LOVEIS to 22522.

Love is Respect can help you find domestic violence resources in your state or area.

Los recursos y servicios también están disponibles en español.
Scarleteen is another resource for people who have been sexually assaulted.

Scarleteen is a website about sex education and resources about sex.

Scarleteen has:

- **Message boards**.
All of these services can help you find resources around sexual assault.

Note 1: Scarleteen’s resources are not hotlines.
You may not have your question answered right away if you contact Scarleteen.

It is best to contact Scarleteen if you have a question that can wait a day or two for an answer.

Note 2: Scarleteen is mostly aimed at people who are 30 years old or younger.
The National Deaf Domestic Violence Hotline (NDDVH) is another resource for Deaf and DeafBlind people who have been sexually assaulted or experienced domestic violence.

The NDDVH has an American Sign Language videophone hotline you can call.

The NDDVH videophone number is 1-855-812-1001 (voice callers will be connected through an interpreter).
Or, you can contact the NDDVH by email at NationalDeafHotline@adwas.org.

The NDDVH can help you find Deaf and DeafBlind-friendly sexual assault resources in your state or area.
The Network/La Red

The Network/La Red is another resource for LGBTQ+ people who have been sexually assaulted or experienced domestic violence.

The Network/La Red has a phone hotline you can call. The Network/La Red phone hotline number is 1-800-832-1901.

The Network/La Red can help you find LGBTQ+-friendly sexual assault resources in your state or area.

Los recursos y servicios también están disponibles en español.
The LGBT National Help Center is another resource for LGBTQ+ people.

The LGBT National Help Center is not just for LGBTQ+ people who have been sexually assaulted.

It is for all LGBTQ+ people.

But the LGBT National Help Center can help LGBTQ+ people who have been sexually assaulted.
The LGBT National Help Center can also help if you are worried about things like:

- Coming out issues
- Gender and sexuality identities
- Relationship problems
- Bullying and bad treatment
• Workplace issues

• HIV/AIDS and STI anxiety

• Safer sex information

• Suicide
The LGBT National Help Center has a few different hotlines.

These are:

**LGBT National Hotline**

The LGBT National Hotline is a resource for LGBTQ+ people of all ages.

The phone number for the LGBT National Hotline is 1-888-843-4564.
**LGBT National Youth Talkline**

The [LGBT National Youth Talkline](#) is a resource for LGBTQ+ people aged 25 or younger.

The phone number for the LGBT National Youth Talkline is 1-800-246-7743.

**LGBT National Senior Hotline**

The [LGBT National Senior Hotline](#) is a resource for LGBTQ+ people aged 50 and older.

The phone number for the LGBT National Senior Hotline is 1-888-234-7243.
1-on-1 Online Peer-Support Chat

The LGBT National Help Center also offers an online chat service.
Trans Lifeline

Trans Lifeline is another resource for transgender and nonbinary people.

Trans Lifeline is not just for transgender and nonbinary people who have been sexually assaulted.

It is for all transgender and nonbinary people.

But Trans Lifeline can help transgender and nonbinary people who have been sexually assaulted.
Trans Lifeline can also help if you are worried about things like:

- Coming out issues
- Gender and sexuality identities
- Relationship problems
- Bullying and bad treatment
• Workplace issues
• HIV/AIDS and STI anxiety
• Safer sex information
• Suicide
The Trans Lifeline phone number is 1-877-565-8860.

Los recursos y servicios también están disponibles en español.
The Trevor Project is another resource for LGBTQ+ young people ages 13-24.

The Trevor Project is not just for LGBTQ+ young people ages 13-24 who have been sexually assaulted.

It is for all LGBTQ+ young people ages 13-24.

But the Trevor Project can help LGBTQ+ young people ages 13-24 who have been sexually assaulted.
The Trevor Project can also help if you are worried about things like:

- Coming out issues
- Gender and sexuality identities
- Relationship problems
- Bullying and bad treatment
• School or workplace issues

• HIV/AIDS and STI anxiety

• Safer sex information

• Suicide
The Trevor Project hotline phone number is 1-866-488-7386.

You can also contact the Trevor Project through their online chat.

Or, you can contact the Trevor Project by texting START to 678-678.
211 is a service that helps people find resources in their communities.

211 does not just help people find resources around sexual assault.

211 helps people find all sorts of resources.

But 211 can also help you find resources around sexual assault.
211 can also help you find resources around things like:

- Health care
- Social services, including disability services
- Food
- Transportation
• Legal services

To connect with your local 211 program, call 211 from your phone.

If you cannot use the phone, you can look up your local 211 program on the 211 website.

The website tool will tell you how else you can contact your local 211.
Los recursos y servicios también están disponibles en español.

Resources and services are also available in other languages through an interpreter.
Easy Read Edition

A Self-Advocate’s Guide to Safer Sex

Part 10: To Learn More
To Learn More

General information on sex and sex education


Scarleteen: Sex Ed for the Real World: https://www.scarleteen.com/


Advocates for Youth: Rights, Respect, Responsibility (3Rs) Curriculum: https://www.3rs.org/

UMN ICI: Feature Issue on Sexuality and People with Intellectual, Developmental and Other Disabilities: https://publications.ici.umn.edu/impact/23-2/cover

Amaze: https://amaze.org/
BISH: A Guide to Love, Sex, and You:
https://www.bishuk.com/

NCIL: Sex Ed for People with Disabilities:
https://www.youtube.com/watch?v=wZ6T8wrqjAE&list=PLuEvYNNQ-dHeVhbyeJHx9s8oqsvBk621v

Scarleteen: Innies & Outies: The Vagina, Clitoris, Uterus and More: https://www.scarleteen.com/article/bodies/innies_outies_the_vagina_clitoris_uterus_and_more

Scarleteen: Innies & Outies: The Penis, Testes and More: https://www.scarleteen.com/article/bodies/innies_outies_the_penis_testes_and_more
General Pregnancy


Birth Control

MedlinePlus: Birth Control: https://medlineplus.gov/birthcontrol.html

Scarleteen: Birth Control Bingo: https://www.scarleteen.com/article/sexual_health/birth_control_bingo

Planned Parenthood: Birth Control: https://www.plannedparenthood.org/learn/birth-control

Bedsider: What you should know about birth control when you have a disability: https://www.bedsider.org/features/1026-what-you-should-know-about-birth-control-when-you-have-a-disability
Sexually Transmitted Infections (STIs)

Planned Parenthood: Sexually Transmitted Infections: https://www.plannedparenthood.org/learn/stds-hiv-safer-sex


Scarleteen: Testing, Testing: All About Getting Tested for STIs: https://www.scarleteen.com/article/bodies_relationships Sexual Health Sexuality/testing_testing_all_about_getting_tested_for
CDC: Get Tested Test Location Finder: https://gettested.cdc.gov/

Scarleteen: When, Where, and Why: Telling Your Partner You Have an STI https://www.scarleteen.com/article/relationships_sexual_health/when_where_and_why_telling_your_partner_you_have_an_sti
HIV


CDC: HIV Prevention: https://www.cdc.gov/hiv/basics/prevention.html

AIDS Map: About HIV: https://www.aidsmap.com/about-hiv

NIH: HIV Info Fact Sheets: https://hivinfo.nih.gov/understanding-hiv/fact-sheets

San Francisco AIDS Foundation: HIV FAQs: https://www.sfaf.org/resource-library/hiv-faqs/

Scarleteen: The Real Deal On HIV, PrEP, and PEP: https://www.scarleteen.com/article/sexual_health/the_real_deal_on_hiv_prep_and_pep
Mpx

CDC: Mpx: https://www.cdc.gov/poxvirus/mpox/index.html

Sexual and Reproductive Health Care

UNFPA: Sexual & reproductive health: https://www.unfpa.org/sexual-reproductive-health

CDC: Sexual health: https://www.cdc.gov/sexualhealth/Default.html
ACOG: Find an OB-GYN: https://www.acog.org/womens-health/find-an-ob-gyn

AUA: Find a urologist: https://www.urologyhealth.org/find-a-urologist
Consent


Scarleteen: A Brief Guide to Consenting with a Nonverbal Partner: https://www.scarleteen.com/article/disability_relationships_sexuality/a_brief_guide_to_consenting_with_a_nonverbal_partner
Amaze: Consent: https://amaze.org/video/consent/

Love is Respect: Understand Consent: https://www.loveisrespect.org/everyone-deserves-a-healthy-relationship/understand-consent/

Love is Respect: How Consent Works: https://www.loveisrespect.org/resources/how-consent-works/

Can We Talk About Consent? book by Justin Hancock: https://www.bishuk.com/can-we-talk-about-consent/

Scarleteen: A Disabled Person’s Guide to Talking with Your Partner(s) About Sex: https://www.scarleteen.com/article/disability/a_disabled_persons_guide_to_talking_with_your_partners_about_sex

Scarleteen: Consent Is Sexy: Sexual Autonomy and Disability: https://www.scarleteen.com/consent_is_sexy_sexual_autonomy_and_disability

Scarleteen: Yes, No, Maybe So: A Sexual Inventory Stocklist: https://www.scarleteen.com/article/advice/yes_no_maybe_so_a_sexual_inventory_stocklist

RAINN: What Consent Looks Like: https://www.rainn.org/articles/what-is-consent

Planned Parenthood: Sexual Consent: https://www.plannedparenthood.org/learn/relationships/sexual-consent
Sexual Assault

Resources for People Who Have Been Sexually Assaulted

RAINN Resources and Hotline: https://www.rainn.org/

The National Domestic Violence Hotline: https://www.thehotline.org/

Love is Respect Resources and Hotline: https://www.loveisrespect.org/
Scarleteen Resources and Direct Services:
https://www.scarleteen.com/

The National Deaf Domestic Violence Hotline: https://www.adwas.org/hotline/national/

National LGBT Help Center Resources and Hotlines: https://www.lgbthotline.org/

Trans Lifeline Resources and Hotline: https://translifeline.org/
The Trevor Project Resources and Hotline: https://www.thetrevorproject.org/explore/

211 Resources: https://www.211.org/

About Sexual Assault

Office on Women’s Health: Relationships and Safety: https://www.womenshealth.gov/relationships-and-safety (NOTE: This resource is aimed at women. But anyone can read it to learn more about sexual assault and domestic violence.)
Stop Relationship Abuse: Get Educated: https://stoprelationshipabuse.org/educated/ (NOTE: This resource talks mostly about women. But anyone can read it to learn more about sexual assault and domestic violence.)

RAINN: Sexual Assault: https://www.rainn.org/articles/sexual-assault

NSVRC: About Sexual Assault: https://www.nsvrc.org/about-sexual-assault

Planned Parenthood: Sexual Assault and Harassment: https://www.plannedparenthood.org/about-us/newsroom/campaigns/sexual-assault-and-harassment
YWCA of Northeastern Massachusetts: About Sexual Assault/Violence: https://ywcansrcc.org/programs-services/about-sexual-assaultviolence/

Sexual Assault and People with Disabilities


NPR: Abused and Betrayed: https://www.npr.org/series/575502633/abused-and-betrayed (About sexual assault of people with intellectual disabilities)

YWCA: Survivors with Disabilities Facts: https://www.ywca.org/wp-content/uploads/Survivors-w-Disabilities-Fact-Sheet.pdf (NOTE: This resource talks mostly about women. But anyone can read it to learn more about sexual assault and domestic violence.)

NOW: The Disability Community and Sexual Violence: https://now.org/wp-content/uploads/2018/05/Disabled-Women-Sexual-Violence-4.pdf (NOTE: This resource talks mostly about women. But anyone can read it to learn more about sexual assault and domestic violence.)