



SEX 2.0

pleasure • gender affirming surgery • bisexy
sexy & over 50 • sex work • sexual fluidity
orgasms • trans pregnancy • resources



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Welcome to Amida Care's Latest Community Magazine!

SEX 2.0 – ON SEXUAL HEALTH AND PLEASURE

CONTRIBUTORS

We extend our deepest thanks to those who contributed to this special publication:

Race Bannon, Ingrid Floyd & Ken De Jesus; Eric Leach, NP; Michelle "Lola" Lopez; Freddy Molano, MD; Lailani Muniz & Sabastian C. Roy; Diana Feliz Oliva; Erika Usui, MPH; Thomas Weber & Bill Gross

HELP & RESOURCES

In New York City: Call 311 for connection to social services for PrEP and sexual health, housing, and mental health support

Ali Forney Center: www.aliforneycenter.org or **1-212-206-0574** for Drop-In Center – Help and support for LGBTQ runaway and homeless youth

Callen-Lorde: www.callen-lorde.org or **1-212-271-7200** – Comprehensive health care for the LGBTQ community

Community Healthcare Network NYC: www.chnny.org or **1-866-246-8259**
Culturally competent, comprehensive, community-based primary care, mental health, and social services for diverse populations in underserved NYC communities

GMHC: www.gmhc.org or Services for HIV-positive people who meet financial and residential eligibility requirements

IRIS HOUSE: www.irishouse.org or **1-212-423-9049**
Support, prevention, and educational services for women, families, and underserved populations affected by HIV/AIDS and other health disparities

National Suicide Prevention Lifeline: **1-800-273-TALK (8255)**
(TTY: **1-800-799-4889**)

SAGE (Advocacy & Services for LGBT Elders): www.sageusa.org or **1-212-741-2247**

Trevor Lifeline: **1-866-488-7386** – Provides crisis intervention and suicide prevention to LGBTQ young people ages 13-24

For more resources, go to: www.AmidaCareNY.org/health-resources/



Women of Color & Sexual *Pleasure*

by Ingrid Floyd, Executive Director & Ken De Jesus,
Director of Testing & Outreach, Iris House

Sex is such a taboo topic among many women of color. Many are not comfortable talking openly about sex or sexual pleasure. Some young Black girls are taught that sex is for procreating or satisfying your partner – and not about your own sexual pleasure.

Here at Iris House – the nation's first HIV/AIDS agency to provide family-focused services to women of color affected by HIV – our work teaches us daily about the thoughts and attitudes of women in our community. HIV-positive women worry about disclosing their status and often fear rejection, while HIV-negative

women worry about preventing STIs (sexually transmitted infections), including HIV.

"Oral sex is a major part of foreplay," one woman told us. "Before I found out about dental dams, my partner and I used cling wrap." An HIV-positive woman said she enjoys sex with her partner but has never asked him for oral sex because she's not sure how he would feel about it. Some HIV-negative women whose partners have never initiated oral sex also feel uneasy about asking for what they want.

Another HIV-positive woman we talked to said that her sex drive "just isn't there anymore. Maybe this is due to menopause." Diminished desire is a concern that many women in our community share, regardless of HIV status.

Sexual pleasure for women can come from a variety of stimuli, including oral, vaginal, or anal penetration or even sex toys. Women who are concerned about contracting an STI can greatly lower the risk by using dental dams and condoms, depending on the type of protection needed. Women without a partner can find an enjoyable sex toy.

All women can find pleasure through masturbation and understanding their own bodies, then they are better able to teach their partners how to satisfy them. Women benefit by feeling comfortable enough to let their partners know what they enjoy – and no longer faking orgasms just to boost their partners' egos.

Women are sexual beings and having sex for pleasure is just as important as having sex to procreate.

What's Your

Pleasure

"Good sex is exciting when he holds me tightly – skin to skin, head to head, kissing and rubbing, bodies slowly wrapping together in the heat of passion. In those moments, nothing matters but feeling and playing it safe."

– Johnny, 40, male, African-American

"I'm a female who likes my men to have a nice, nice butt. I love to start with mental stimulation, wind things up with touching and kissing, move into oral sex, and end with a fantastic burst. I love to turn my partner over so I can rub and insert my clitoris in and on his ass while massaging his penis. It ends in delightful ecstasy."

– Jannete, 60, female, African-American

"There really is nothing sexier than BDSM. It prioritizes consent and pleasure in a way that vanilla sex does not. I recently discovered the joy of being flogged, and it's insanely glorious! It's extra awesome having sensate injuries that stay with you the following day. Every time I sit down and feel a sting, I feel powerful, sexy, and exhilarated!"

– Cassidy, 28, non-binary, Latinx

Staying in the Moment Promotes Orgasm!

We all have heard that the biggest sex organ is our brain. Sexual drive is influenced by stress, relaxation, sleep, diet, or exercise—all of which can have an impact on our state of mind. Our ability to be and stay present and focused during sex heightens pleasure and orgasms. Concentrating on touch, physical sensations, sights, sounds, scents, and tastes can help us stay present, boosting sexual satisfaction.

re?

Clitoral Stimulation Is Key

While many women experience orgasm through vaginal penetration alone, most (75%, by some estimates) need clitoral stimulation to climax. Therefore, including some clit play in your sexual repertoire can help bring your female partner to ecstasy.

"I find pleasure in meeting up with someone new and talking about what we want. I like to hear how they might want to be tied up or kissed gently. I like when someone listens to what turns me on and then says they would love to do that. I also enjoy hearing the things that aren't on the menu for the hookup because I know I helped create a space for fun, orgasms, respect, and maybe another go-round."

– Vicente, 30, trans man, Mestizo/Mixed Race/Latino

"I like when my partner uses touch to heighten our sexual experience. Using hands, tongue, objects, etc., in the right way can enhance the pleasure you give/receive."

– Sanni, 35, female, African-American

Advancements in Gender Affirming Surgery Are Enhancing Sexual Pleasure

Researchers at Karolinska University in Sweden followed transgender women for up to five years after Gender Affirming Surgery (GAS) and found that the vast majority felt little or no pain, were satisfied with their surgeries, and experienced orgasms. Another recent study on GAS from the University of Trieste, Italy, found that the positioning of the newly formed clitoris affects sexual pleasure. A reduced distance between the vagina and clitoris through GAS is associated with greater sexual satisfaction, the study concluded.



CULTURE FOSTERS CONSENT

By Race Bannon

When BDSM (bondage, discipline and dominance, submission, and sadomasochism) is discussed, it conjures images of whips, chains, and a plethora of kinky gear and activities. That is certainly much of what BDSM is about, but there's an aspect to BDSM culture that can offer a helpful toolset to anyone of any sexual persuasion.

Among experienced BDSM practitioners there has long been an axiom by which they live – all must be consensual. Before playing, everyone gets to articulate their mental and physical limits and expects them to be honored.

Consent is a hot topic currently, but it's always been built into BDSM culture's DNA. "Safe, sane, and consensual" is a well-known BDSM mantra alongside another, "risk-aware consensual kink." Notice they both highlight consent. It's a core value within all BDSM, kink, and fetish communities.

Walk into any respected BDSM club meeting, event gathering, or education class, and front and center is always the concept of consent. It's often referred to as the "negotiation" phase of BDSM play. This is something everyone, BDSM player or not, can adopt as a practice prior to any sexual encounter.

In short, talk before you play. Ask questions. Be transparent and ask the other person to do the same. Set limits for yourself and ask the other person theirs. Keep a line of communication open, not just before you play, but ongoing while you play. Even afterward it's a good idea to check in with each other to make sure everything was fun and that no limits were encroached upon unintentionally.


For some people the negotiation and resulting foundation of consent takes only a few minutes. Others might have lengthier discussions. It takes as long as it takes because violating someone's consent is never acceptable.

If erotic power exchange in the form of dominant and submissive roles is part of the equation, great, but it's often best to set those roles aside briefly during negotiations to minimize their influence. They could impede fully open and honest communication. You want to level the playing field as two people try to figure out how to best create the erotic nirvana we all seek.

Negotiate with your sexual partners, be they of the BDSM variety or not. The consent you elicit from each other will serve as a platform for much better sex and play.



AMONG EXPERIENCED BDSM PRACTITIONERS THERE HAS LONG BEEN AN AXIOM



**TALK BEFORE YOU
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SET LIMITS FOR YOURSELF
AND ASK THE OTHER
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BY WHICH THEY LIVE - ALL MUST BE CONSENSUAL.



Some (Still) Like It **Hot**

Gay, Gray, and Not Going Away!

by Thomas Weber, Director, Care Management Service & Bill Gross, Manager,
SAGEPositive Program; SAGE (Advocacy & Services for LGBT Elders)

Like their younger counterparts, many older gay men from age 60 and up are still interested in having a healthy, hot sex life. And many are having it! What might be different for some is that their bodies are older. They may be on medications for blood pressure or cholesterol that affect their sex drive or function. They may have issues with their prostate gland – including cancer. They may be going through male menopause and experiencing changes such as weight gain or hair loss or going gray, which impacts how they feel about themselves.

Older gay men may worry that they are not as attractive as they used to be, or that they won't be able to perform sexually like they once did. "Who will want me?" some of them may feel, consciously or unconsciously. While all of these factors might not stop them from having sex, they can complicate things a bit.

Another thing to keep in mind is that for these members of older generations, HIV and AIDS have been a constant presence for half or more of their lives. Many are living with the virus, and almost all have watched their peers sicken and die during the worst days of the AIDS crisis. They take HIV very seriously.

Although some older gay men have embraced the use of PrEP (pre-exposure prophylaxis), others would never dream of having sex without a condom. They don't trust taking a pill to protect them or their sex partners – and PrEP safeguards against HIV but does not protect against STIs (sexually transmitted infections).

Older gay men can find themselves worried about infection following a sexual encounter, the same as their younger counterparts. However, they are not as likely to know about PEP (post-exposure prophylaxis) as an option.

All that said, though older gay men may face challenges that are different from younger gay men, they still want the same things out of sex when it comes to experiencing pleasure and affection. They want to get off and/or to feel loved. They want to feel connected. They want to be touched by and touch someone else, and they want to have intimacy with another man. They are really not so different, after all.

SAGE is the nation's largest and oldest organization dedicated to improving the lives of LGBT older adults. Our mission is to lead in addressing issues related to aging in our communities.

The SAGEPositive Program offers a range of services to LGBT people over age 50 who live with or are potentially impacted by HIV, including case management, support groups, sexual wellness workshops, HIV and STI testing, PrEP seminars, educational forums, caregiver support, etc.

For more information, contact Bill Gross at **bgross@sageusa.org** or call (212) 741-2247. For more about SAGE, email **info@sageusa.org**.

Other HIV services for older gay men are available through GMHC (**www.gmhc.org**); Latino Commission on AIDS (**www.latinoaids.org**); Callen-Lorde (**www.callen-lorde.org**); GRIOT Circle (**www.griotcircle.org**).

Sex Work and the City

by Erika Usui, MPH, Director of Program Evaluation
The Ali Forney Center

Every year, The Ali Forney Center (AFC) welcomes over 400 new LGBTQ runaway and homeless youths into our program. During our intake assessment interviews, we always ask: “Have you ever exchanged sex for money, drugs, or a place to stay?”

Last year, about 25 percent of the young people answered “yes” to this question, and another 7 percent chose not to answer. We know that this percentage is greatly underreported, as youths often only open up to service providers with time and trust. We eventually learn that more than half of the youths have engaged in survival sex work, and some continue to be actively engaged while being members of our program.

At AFC, we promote a risk-reduction approach. This means we make sure that those who engage in sex work do so as safely as possible. We let them know we understand that engaging in sex work by choice or circumstances may be their reality now.

We dismantle stigma by letting these young people know we understand sex work is an income-generating activity that may be necessary for survival. We also let them know that leaving sex work can be a goal, if they so choose. We provide alternative vocational and employment opportunities, so they don’t need to engage in sex work if that’s not what they want.

As with any risk behavior, the risks of sex work exist on a spectrum, depending on each individual’s circumstances. We always meet the young person “where they’re at,” and we stay true to our public health mandate to protect the health of those who engage in sex work.

Stock photo with model.



IF YOU ARE INVOLVED IN SEX WORK, BE AS SAFE AS POSSIBLE. HERE ARE SOME TIPS TO CONSIDER:

1. Carry your own equipment: barriers like male and female condoms, as well as dental dams, lube, and toys. Make sure these items are new or cleaned for each use, to prevent infections.
2. If it's difficult to use barriers consistently, consider PrEP (pre-exposure prophylaxis). It's a daily pill that stops HIV infection but does not protect against other STIs (sexually transmitted infections).
3. If you've potentially been exposed to HIV, consider taking PEP (post-exposure prophylaxis). PEP is started within 72 hours after a possible exposure to HIV, but the sooner you start PEP, the better. If you're prescribed PEP, you'll need to take it once daily for 28 days.
4. Stay focused on sores and rashes on the client. Avoid these areas, or make sure you use barriers for these areas.
5. Get health check-ups every three months. Get diagnosed and treated early, so you don't get too sick. You can get low- to no-cost services at the NYC Department of Health's eight Sexual Health Clinics.
6. Meet regularly with your care team: your case manager, health counselor, and mental health specialist. Stay up-to-date on housing and work opportunities, and get referrals on physical and mental health providers who are culturally competent.
7. Remember that you have the right to high-quality care and services, without discrimination on the basis of "where you're at" right now.

DEALING WITH LAW ENFORCEMENT

TIPS FOR SEX WORKERS:

IF YOU ARE TAKEN INTO CUSTODY

- Do not resist arrest, as you could face additional charges;
- Do not explain or excuse yourself;
- Remain silent;
- Do not sign any documents;
- Ask for a lawyer continuously until your request is granted.

ADVICE FOR PEOPLE OF TRANS EXPERIENCE

- When talking to police, you are legally protected to use your preferred name/gender identity, and the police are mandated to follow that, even if those identifiers do not align with your legal identification.
- Law enforcement is not allowed to “search” you to determine your biological sex. If this happens, you must tell your lawyer.
- If a search is mandated for other reasons, you have the right to be searched by an officer whose gender matches with your gender identity or whose gender identity you are comfortable with; and you have the right to ask for the officer’s name and badge.
- You have the right to be held in a sex-segregated facility that aligns with your gender identity. If you feel you’ve been misgendered, etc., you should tell your lawyer or lodge a complaint with the Civilian Complaint Review Board.

Source: Dr. Freddy Molano, Community Healthcare Network NYC





SEXUAL HEALTH

You Need Your _____ Examined!

The pleasures of sex can include the entire body. It has been said that our largest sex organ is the brain. However, the basics of sex often get reduced to the genitals. Keeping them healthy is an excellent foundation for enjoying sex.

Everyone has their own level of comfort with exploring their genitals. Even if you are very comfortable with yours, and especially if you are not, a professional check by your Primary Care Provider (PCP) is recommended. The level of health you may need is not always obvious.

Human beings have internal and external genitals. For some people, the external genitals are a vulva and vagina, and for others, the external genitals are a penis and scrotum. Genitals have many and varied functions. They help us urinate, are part of sexual pleasure, and can play a role in reproduction (starting a pregnancy). For some people, the genitals they were born with do not conform to their gender identity. They may choose to affirm their true gender identity by changing how they present themselves, seeking hormonal and other therapies, and, in some cases, undergoing Gender Affirming Surgery (GAS).

Exams should be specific to your age and the type of genitals you have, both internal and external. Discuss which exams are right for you. The more you know, the more comfortable you may become. Understanding your sexual pleasure through masturbation can help improve the sexual pleasure you have with someone else. A professional checkup can reassure you that your sex organs are healthy.

Some exams to consider are:

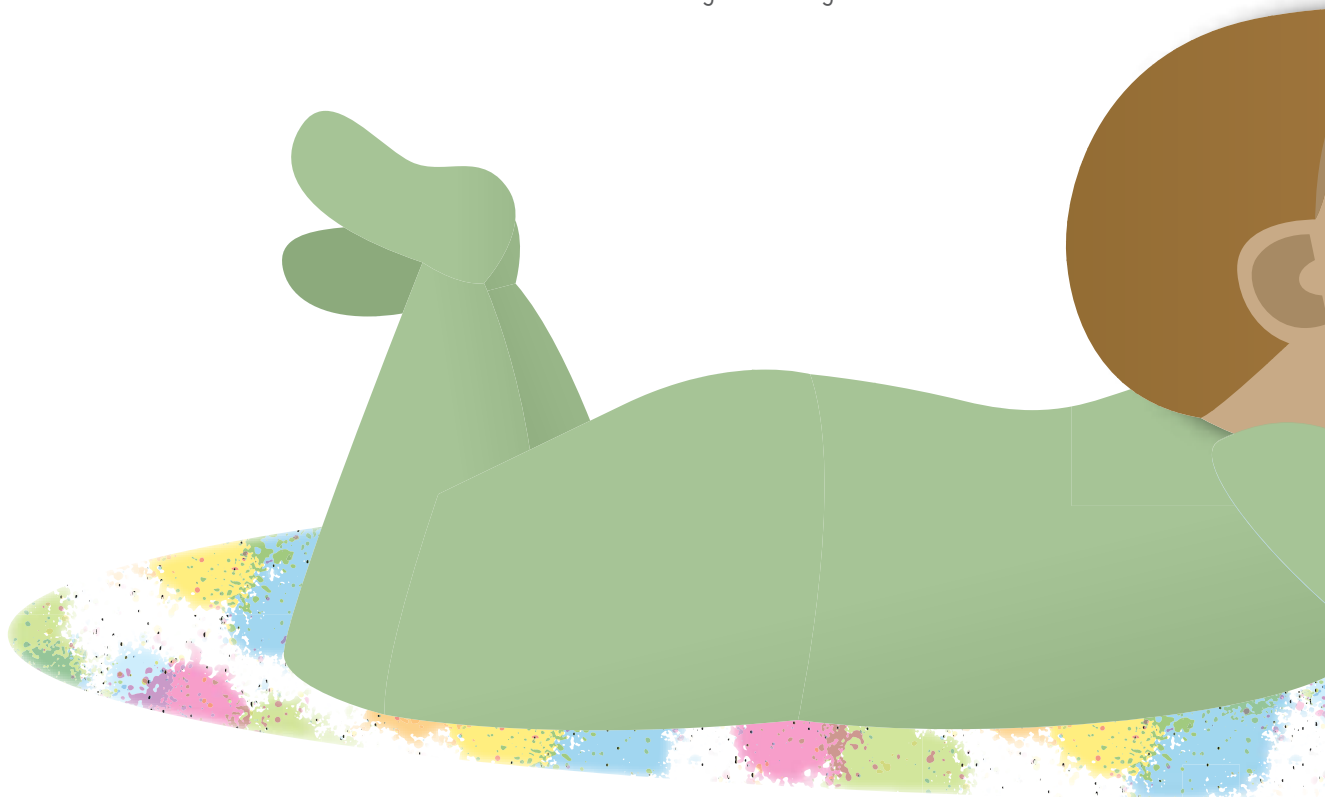
- Urine specimens
- Throat and anal swabs
- Blood tests
- Prostate exams (depending on age and other medical factors)
- Breast exams
- Anal pap exams (depending on medical factors)
- Vaginal pap exams

BABY TALK

What a Mixed-Status, Transgender Couple Can Expect When They're Expecting...

LAILANI MUNIZ, 35, an HIV-positive transgender woman now appearing in the FX television series *POSE*, and **SABASTIAN C. ROY, 47**, an HIV-negative transgender male actor and bodybuilder, met through their work as LGBTQ activists in 2016. Engaged to marry this year, the couple have been trying for some time to conceive a child.

Their mixed HIV status is an added complication. Lailani stays undetectable (virally suppressed), and Sebastian started taking PrEP (pre-exposure prophylaxis) not long after they began dating. Each is the parent of an adult son, and their joint household today includes a 30-year-old adoptive son, several dogs and cats, a bird, and a ferret. The couple are committed to doing “whatever it takes” to have a biological child together.



BIG SACRIFICES

As persons of transgender experience, Lailani and Sabastian are both making "big sacrifices" to try for a baby. Two years ago, they stopped taking the hormones that support their transitions so they could "get pregnant the old-fashioned way," and Sabastian can carry their child. They laugh about having used phone apps to alert them to moments when conception is most likely.

As an Amida Care member, Lailani received health coverage for semen analysis. The procedure showed that her system is low in an enzyme that aids conception. To boost sperm count, she has been dressing in loose-fitting sweat pants and taking good care of herself physically and emotionally.

Sabastian has adapted to having menstrual periods again. He jokingly calls them the "red baron." Although at 47, he is "in the older spectrum," Sabastian remains confident of his fertility – but regrets not having frozen his eggs before he transitioned. He encourages younger transgender men and women to consider saving their eggs and sperm, respectively, before making irreversible decisions like Gender Affirming Surgery (GAS).

THE CHALLENGES

If natural attempts fail, Sabastian and Lailani plan to turn to *in-vitro* fertilization, an artificial insemination process that combines extracted egg and sperm in a laboratory and then implants the embryo.

Such procedures can cost tens of thousands of dollars, so getting a green light for health coverage can be difficult.

Like others of transgender experience, Lailani and Sabastian have sometimes found that dealing with health care providers can be challenging emotionally and physically. Pleased with their current provider, they occasionally encounter health care professionals who are uninformed about the protocols of caring for transgender patients.

Despite the obstacles, Lailani and Sabastian refuse to give up on their dream of parenthood. "We wouldn't change it for the world!" Lailani affirms.





Diana Feliz Oliva is feeling thankful

A Transgender Activist Posts on Facebook About Her Gender-Affirming Surgery

For more than 20 years, Diana Feliz Oliva MSW, has worked in social services and public health throughout California. She joined Gilead as HIV Community Liaison in 2017, becoming Gilead's first openly transgender employee.

In late 2018, Diana "made her own health care needs a priority" and underwent Gender Affirming Surgery (GAS). She shared her journey with friends on Facebook. **Here are some highlights:**

Diana Feliz Oliva is feeling blessed – November 30

Good morning, Peeps! On my way to Cedars-Sinai Medical Center in Beverly Hills to finally have my Gender Affirming Surgery (GAS)... Been waiting many years for this day... Feeling so many emotions: happiness, gratefulness, and joy!!!

I knew I was different ever since age 5, but didn't know why until I heard the word "transgender" at age 18. Then everything made sense. Today I overcome all barriers, challenges, stigma, and discrimination to make one of my dreams a reality. Today I have a heart full of love for my family and friends, who've supported me in my journey to being the woman I am now. Please keep me in your prayers and send lots of healing and positive energies. Thank you, Lord, for always being with me!

P.S. Please come visit!

Diana Feliz Oliva at Cedars-Sinai Medical Center – December 1

Day 1: After nine hours, my surgery is finally done! Time to recover, but this pain is excruciating. Please God, help me! I'll be here recuperating for seven days, and lots of friends have been calling and texting. If you'd like to come visit, that would mean a lot. I need some distractions from the pain... Oh, and happy World AIDS Day!!!

Diana Feliz Oliva is feeling loved – December 3

Day 3: Feeling a little better and in good spirits since my GAS surgery and face-resurfacing surgery last week. Very emotional, to say the least, and I want to heal all at the same time... Oh, and of course I wanted to be SNATCHED everywhere!!!



Thanks to my friends for visiting and/or bringing flowers and balloons. So pretty! Most of all, thanks for the healing and rebirthing conversations we've had in my suite these last few days. Allowing me to cry and be vulnerable has been liberating!!!

Oh, and I need butt massages, too... After nine hours of surgery, I woke up with knots and pinched nerves in my butt... Calling all professional butt masseuses! LOL

Diana Feliz Oliva is feeling thankful – December 5

Day 5: Feeling a lot better. Last week was very emotional. A lifelong dream came true! The best word to describe my GAS surgery would be "liberating!" The sense of relief, freedom, and liberation is overwhelming. Now when I stand in front of the mirror, I no longer feel the shackles of shame and stigma! If you still want to visit, I'm here 'till Friday.

Diana Feliz Oliva is feeling loved – December 6

Day 6: Today I saw my "kitty cat" for the very first time. Felt like Xmas morning, and I got to unwrap my special gift. My doctor came to undress me and reveal this new chapter in my life. I was hoping that six days of healing would give me a healthy, pretty-looking kitty cat. Meowww! LOL

UPDATE: My first reaction was shock. I thought to myself: "EWWW, my pussy doesn't look pretty at all!" After six days in a hospital bed, some sutures opened up. I had a big rip at the bottom right of my vaginal canal. My doctor told me the sutures will heal eventually. I am trying to stay positive, but feel very disappointed.

I have two large scars on the side of my pussy and two large holes at the top, where tubes discharge any extra fluid. The nurse told me this is normal and will eventually go away, after I heal for several months.

"The best word to describe my GAS surgery would be 'liberating!' The sense of relief, freedom, and liberation is overwhelming."

Diana Feliz Oliva – December 7

Back home since late last night...Thanks to my friends for helping with my discharge. I couldn't have done it without you... Feels so much better to be home...



Now it's time to dilate (three times a day). If anyone wants to help, please let me know. I'm a little scared to be honest. Looking for dilators... LOL

Diana Feliz Oliva is feeling concerned – December 13

Not feeling too good today... Went to see my doctor. Was having a lot of post-surgery pain and still bleeding from dilating. He said it was normal and that I'd feel pain for the first 30 days.

He asked whether I'm dilating three times daily and douching once, and I said: YES, OF COURSE! He told me to be patient, stay indoors, get plenty of rest, and not exert myself. Finally, he renewed my pain meds prescriptions, gave me more medical gauze and lube for dilation, and sent me home.

Please keep me in your thoughts and prayers...

Diana Feliz Oliva – December 18

Not feeling good today. Pain, nausea and tiredness, but what made me smile was someone sending me freshly baked Xmas cookies!

Diana Feliz Oliva – December 27

Waking up in my own bed always feels great... Had an amazing time with my family for Christmas, but it's good to be back at home in LA... Now it's time to sleep in and rest my body.

Diana Feliz Oliva is feeling loved – January 1

Happy New Year 2019!!! I'm excited for the fabulous opportunities awaiting me. Last year was extraordinary. I accomplished many great things. After 23 years of working with nonprofits, I stepped out in faith and transitioned to pharmaceuticals, not knowing a darn thing about corporate culture. My first year was awesome.

2018 was also extraordinary in my personal life. On November 30th, I accomplished my long-time goal of having GAS surgery. After years of creating transgender health programs nationwide and advocating for hundreds of my transgender siblings to have their surgeries, I finally made my own health care needs a priority.

"I lived my life with shame and stigma, but not anymore! I'm done hearing the committee in my head tell me I'm not worthy and valued."



Diana Feliz Oliva is feeling loved – January 1

As a transgender Latina, I'd always been told I wasn't good enough. I lived my life with shame and stigma, but not anymore! I'm done hearing the committee in my head tell me I'm not worthy and valued. Today I believe I'm more than good enough... Shittttt, I'm a bad-ass Chicana and deserve all the great things coming my way!!!

To all my Peeps, wishing you blessings in 2019. If no one has told you today that they love you, let me be the first to say I LOVE YOU! – [Lady Diana](#)

Diana Feliz Oliva is feeling determined – January 10

Today is the day I graduate to my fifth and final dilator: big-girl status now. ... I started with lil' Billy (skinny orange one), now I have big Bob (thick orange one). Yes, I named each one of them, LOL!

Dilating three times a day for 20 minutes has been my life for the past five weeks. I didn't know having a kitty cat would be so high maintenance, LOL... Hope I can take big Bob. Wish me luck!!!

Diana Feliz Oliva – January 18

First day back at work after being off on medical leave for seven weeks. Feels good to be back! Watch out 2019, cuz here I come!!

Diana Feliz Oliva – February 18

On my way to a doctor's appointment for my post-surgery checkup... Meooooowwww!!!

Diana Feliz Oliva is feeling lovely – May 31

Wow time flies!!! It's been 6 months since my new kitty kat. I'm feeling great and it's looking pretty good! I feel so happy and grateful. I hear it purring!!!



What Lola Wants, Lola Gets,

*and She
Wants It All*



*We bisexuals just have to “bring it.”
If we remain invisible, we allow society
to stigmatize us. Society tends to define
bisexuals as being confused and not
knowing what we want. It’s our
lives. If we aren’t living our truths,
we’re depriving ourselves of thriving.*

by Michelle “Lola” Lopez

I am a person who likes both genders, who’s attracted to people independently of their gender. I’ve also dated a transgender man. I know what I want, and I want it all. That’s why I’m bisexual.

There’s a certain look I like. I love butch-looking women, and I have to admit that I love breasts. But I think the biggest misconception about bisexuality is that it’s just sex, that we’re in it for sex-related stuff. There’s also an emotional and spiritual attraction to the people I get involved with.

For many years I used to identify as lesbian. About eight years ago, things turned around for me, and I started to identify as bisexual. I was seeing a woman and also seeing a guy on the side. He and I really got into it one night. I wanted to switch to a certain position, and he didn’t want to. I wanted control. I was no longer submissive. With women, we are pleasing each other, but it’s liberating to take charge as a woman with a man.

When it comes to bisexuals, I think therapy services are needed, to help us claim a level of self-acceptance. I’d like to see more bisexuals talk about our experiences, to show up at the table and be included – especially when it comes to sexual health. That is key for those of us who are engaging in sexual intimacy with both genders. We must pay attention to, address, and navigate our needs.

*Michelle, a mother and HIV-positive activist,
serves on the Board of Directors of Select Health and has
worked in the public health sector for most of her career.*

Ever Heard About

“Sexual Fluidity”?

*F*or many of us, sexual identity has been static or set for most of our adult lives. We tend to identify as gay, straight or bisexual, but love and sexual attraction are complex. The term “sexual fluidity” means that a person’s attractions, and therefore their sexual identity – lesbian, gay, bisexual, heterosexual – can change over time. Some experience it in their youth, others later in life, and some, multiple times in the course of their lifetimes...

AND IT’S ALL OK! Enjoy it!

IS PrEP RIGHT 4U?

Consider talking about PrEP (pre-exposure prophylaxis) with your Primary Care Provider (PCP) if you identify with any of these situations:

- You have multiple sexual partners;
- Your primary sexual partner(s) is HIV-positive;
- You have been the receptive partner for condomless sex, especially with a partner who is HIV-positive or whose status is unknown to you;
- You have been treated recently for a non-oral STI (sexually transmitted infection);
- You've taken PEP (post-exposure prophylaxis) more than once in the last 12 months; or
- You find it challenging to consistently use condoms during sex, or your sexual partner(s) refuses to use condoms.

HOW TO GET PrEP

PrEP is available free or at low cost in New York. Speak to your PCP and go to the NYC Department of Health website at: <https://on.nyc.gov/2mbuT7I> for information on how and where to get Sexual Health services (including PrEP) in your area.

Source: Harlem United

