

lgbt

(northern ireland)



Friends
Lesbian
Gay
Transgendered
Bisexual
Artistic
Caring
Creative
Sarcastic
Comical
Talkative
Silly
Light-Hearted
Out-Going
Adventurous
Strong
Quiet
Happy
Energetic
Ambitious
Sad
Childish
Weird
Smart
English
Green-Minded
Merky
Lazy
Rational
Childish
Talkative
Comical
Green-Minded
Merky
Childish
Talkative
Comical
Green-Minded
Merky

Acknowledgments to:

Gay & Lesbian Youth Northern Ireland (GLYNI)

The Rainbow Project

PSNI


Families and Friends of Lesbians and Gays

LGBT Scotland

www.cdc.gov/lgbthealth

www.yoursexualhealth.ie

Designed by Joanne Maguire



Artistic Friends Friends
Lesbian Quiet Quiet
Gay Creative Creative
Transgendered Sarcastic Sarcastic
Bisexual Family Family
Comical Comical
Strong Caring Caring
Creative Creative
Comical Comical
Sarcastic Sarcastic
Family Family
Lesbian Lesbian
Friends Friends
Artistic Artistic
Bisexual Bisexual

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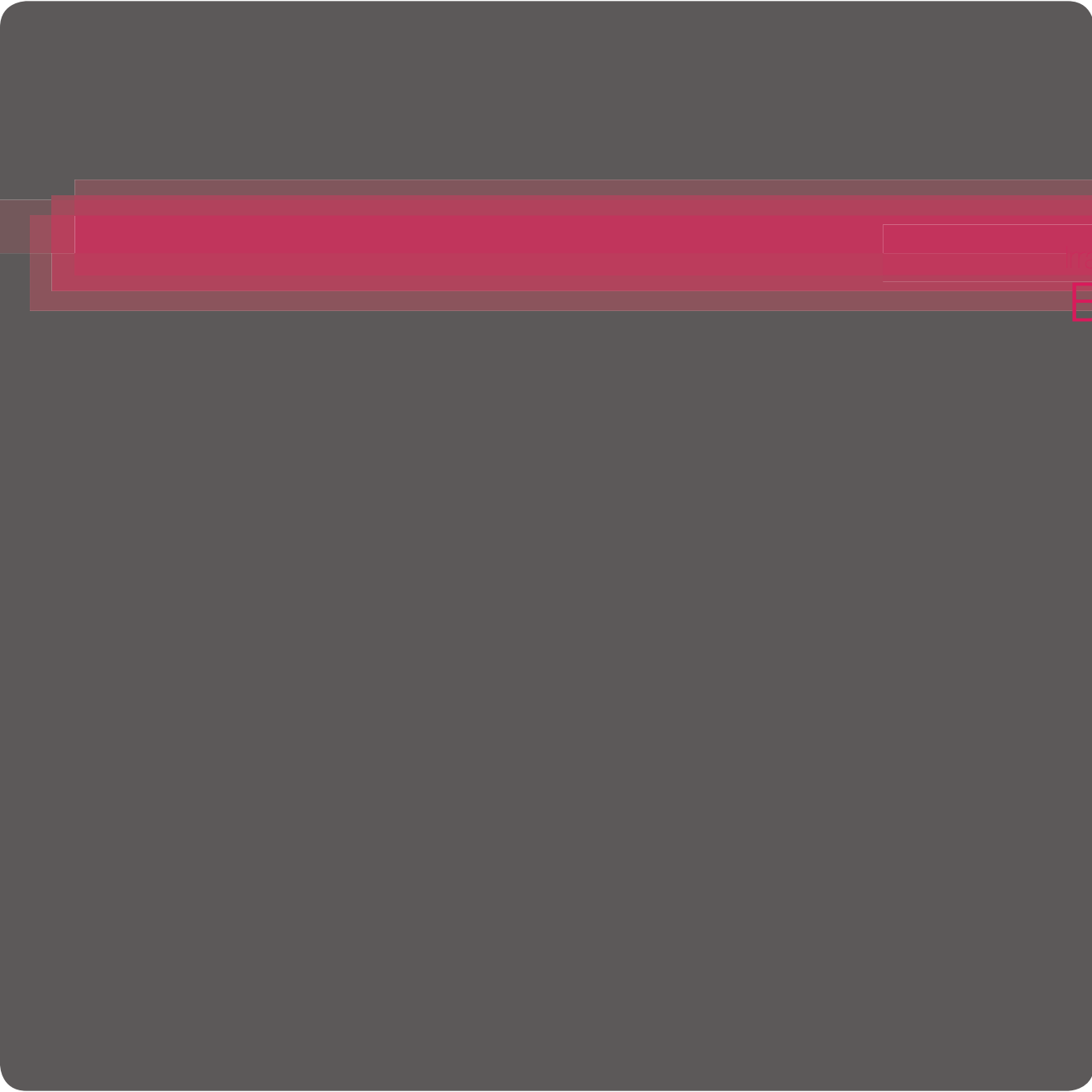
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1.0

definitions



Gay

This is a brief guide to the terms used in this booklet.

Gay

A man who is physically/emotionally attracted to other men.

Lesbian/Gay

A woman who is physically/ emotionally attracted to other women.

Bisexual

A person who is attracted to both men and women.

Transgender

Someone who identifies as a different gender to that which they were assigned at birth.

Coming Out

Knowing and telling people who you are and who you are attracted to.

Questioning

When someone is still unsure about their sexual orientation.

LGBT

Stands for Lesbian, Gay, Bisexual and Transgender.

Sexual orientation:

Term for an individual's enduring emotional and sexual attraction to members of the same and/or opposite sex, including lesbian, gay, bisexual and heterosexual (straight) orientations.



There are a whole host of categories within the transgender umbrella and terms associated with being transgender. Different people define themselves in different ways, below is a short list of some of the most common terms and definitions.

Heterosexual /straight

Refers to someone who is emotionally and sexually attracted to people of the opposite sex.

Homophobia /Transphobia

Prejudice against anyone who is or is thought to be lesbian, gay or bisexual or transgender.

Transgender

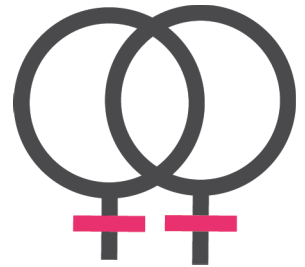
An umbrella term used to include all categories within the trans community, including transsexuals, cross-dressers, androgynes, and polygender people.

Transsexual

Someone whose physical body does not match their gender identity and changes their physical appearance usually through hormones and surgery to better align their physical body and gender identity.

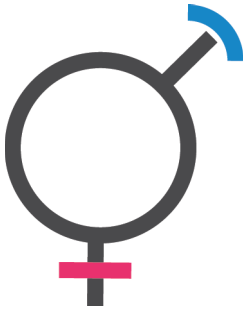
Transsexual man

Someone who is born with a female body, but whose gender identity is male and transitions to live permanently as a man.



Lesbian





Bisexual

Transsexual woman

Someone who is born with a male body, but whose gender identity is female and transitions to live permanently as a woman.

Cross Dresser

Someone who is happy with their physical gender but dresses as the opposite gender at times for various reasons.

Intersex

Someone who is born with genitals and/or their internal reproductive organs which are not clearly male or female. Doctors may make a decision as to assign one gender shortly after birth.

Androgyne

Someone who doesn't clearly fit into the typical masculine and feminine gender roles of society physically and/or emotionally.

Polygender

People who reject defining their gender as simply male or female.

Gender Queer/Fluid

Similar to Polygender, people who see themselves as being both male and female or neither.



Drag King/Queen

Someone who dresses and takes on the persona and gender characteristics of the opposite sex usually in an exaggerated form. This is mainly for performance or fun.

Gender Dysphoria

A term used to describe when someone has ongoing uncomfortable or uncertain feelings about their assigned gender at birth.

Hormone Replacement Therapy (HRT)

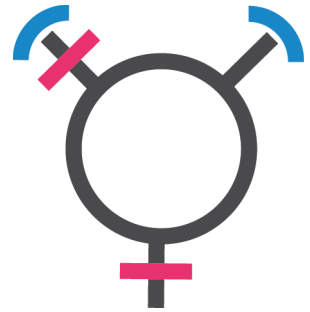
A course of hormones which are taken to replace the hormones which are naturally produced by the body as part of the transitioning process.

Gender Reassignment Surgery

Surgical procedures by which a person's physical appearance and function of their existing sexual characteristics are altered to resemble that of the other sex.

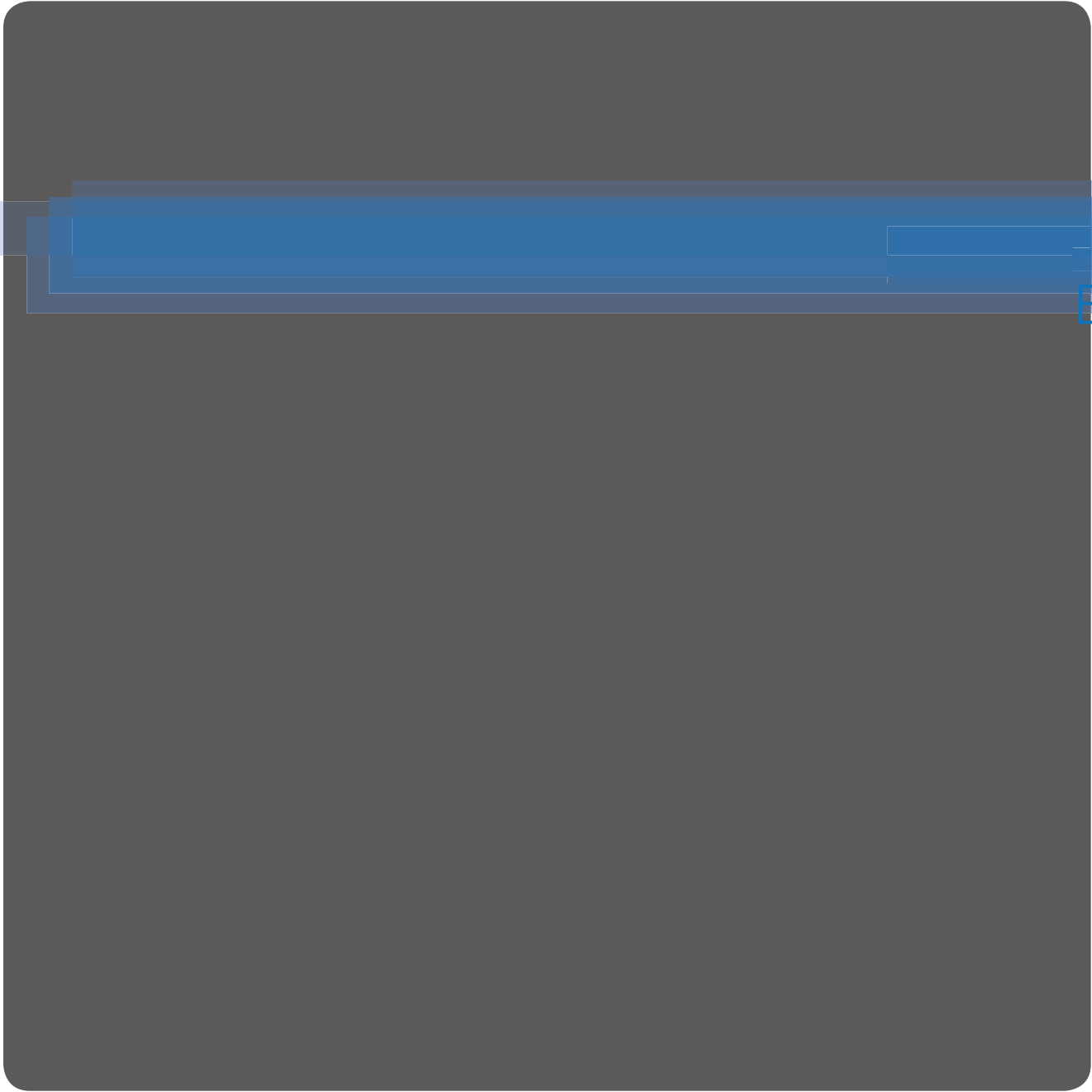
Going Full Time

When someone begins to live permanently as the gender they feel inside. In the UK trans people must 'go full time' for a year before having access to hormones and surgery.



Transgendered





Aesthetics Friends Quiet Strong Carping Creative
Lesbian Gay Transgendered
Bisexual Family Comical
Childish Talkative

2.0

CULTURE



The world's best-known version of the rainbow flag, sometimes called 'the freedom flag', was popularized as a symbol of lesbian, gay, bisexual and transgender (LGBT) pride and diversity by San Francisco artist Gilbert Baker in 1978.

LGBT culture, is the common culture shared by lesbian, gay, bisexual, transgender, and queer (LGBTQ) people. It is sometimes also referred to as Queer culture. LGBT culture varies widely by geography and the identity of the participants.

Not all LGBT people identify by or affiliate with LGBT culture. Reasons can include geographic distance, unawareness of the subculture's existence, fear of social stigma, or personal preference to remain unidentified with sexuality or gender based subcultures or communities.

In some cities, especially in North America, LGBTQ people live in gay villages neighbourhoods with a high proportion of gay residents. LGBTQ communities organize a number of events to celebrate their cultures, such as Pride parades, the Gay Games and Southern Decadence.

Gay Male Culture

“Homosexuality” was the main term used until the late 1950s and early 1960s. After this point, a new “gay” culture came to be. “This new gay culture increasingly marks a full spectrum of social life: not only same-sex desires but gay selves, gay neighbors, and gay social practices that are distinctive of our affluent, postindustrial society”.

During the 19th and early 20th centuries, gay culture was highly covert and relied upon secret symbols and codes woven into an overall straight context. Gay influence in early America was mostly limited to high culture. The association of gay men with opera, ballet, professional sports, couture, fine cuisine, musical theater, the

Golden Age of Hollywood, and interior design began with wealthy homosexual men using the straight themes of these media to send their own signals. In the very heterocentric Marilyn Monroe film *Gentlemen Prefer Blondes*, a musical number features Jane Russell singing “Anyone Here for Love” in a gym while muscled men dance around her.

The men’s costumes were designed by a man, the dance was choreographed by a man, and the dancers, as gay screenwriter Paul Rudnick points out, “seem more interested in each other than in Russell”, but her reassuring presence gets the sequence

After the Stonewall riots in the United States in 1969, gay male culture began to be publicly acknowledged for the first time.

past the censors and fits it into an overall heterocentric theme.

Some gay men formed The Violet Quill society, which focused on writing about gay experience as something central and normal in a story for the first time, rather than as a “naughty” sideline to a mostly straight story. A good example is the short story *A Boy’s Own Story* by Edmund White.

In this first volume of a trilogy, White writes as a young homophilic narrator growing up under the shadow of a corrupt and remote father. The young man learns bad habits from his straight father and applies them to a gay existence.

Celebrities such as Liza Minnelli, Jane Fonda, and Bette Midler spent a significant amount of their social time with urban gay men, who were now popularly viewed as sophisticated and stylish by the jet set.

More celebrities themselves, such as Andy Warhol, were

open about their relationships. Such openness was still limited to the largest and most progressive urban areas such as New York City, San Francisco, Los Angeles, Seattle, Chicago, Dallas, Houston, Atlanta, Miami, Boston, Washington DC, New Orleans, and Philadelphia, however, until AIDS forced several popular celebrities out of the closet due to their contraction of what was known at first as a “gay cancer”.

Lesbian culture

As with gay men, lesbian culture includes elements both from the larger LGBT culture and elements that are specific to the lesbian community. Often thought of in this regard are elements of counterculture that have been primarily associated with lesbians in Europe, Australia/New Zealand and North America and includes large lesbian specific events such as Michigan Womyn’s Music Festival and the Club Skirts Dinah Shore Weekend.

Contemporary Lesbian culture also has its own icons such as Melissa Etheridge. Others include k.d. lang (butch), Ellen DeGeneres (androgynous), and Portia de Rossi (femme).

The history of lesbian culture over the last half-century has also been tightly entwined with the evolution of feminism. Lesbian separatism is an example of a lesbian theory and practice which identifies specifically lesbian interests and ideas and promotes a specific sort of lesbian culture.

Older stereotypes of lesbian women stressed a dichotomy between women who adhered to stereotypical male gender stereotypes (“butch”) and stereotypical female gender stereotypes

("femme"), and that typical lesbian couples consisted of a butch/femme pairing. Today, some lesbian women adhere to being either "butch" or "femme," but these categories are much less rigid and are now uncommon as lesbianism becomes more mainstream.

Bisexual culture

Bisexual culture emphasizes opposition to or disregard of fixed sexual and gender identity called monosexism (discrimination against bisexual, fluid, pansexual and queer-identified people), bisexual erasure, and biphobia/panphobia (hatred and/or distrust of people who do not adhere to monosexual behavior). Biphobia is common (although lessening) in both the gay and lesbian community and the straight community.

Contemporary western bisexual/pasexual and fluid culture also has its own touchstones such as the books *Bi Any Other Name: Bisexual People Speak Out*, edited by Lani Ka'ahumanu and Loraine Hutchins, and *Getting Bi: Voices of Bisexuals Around the World* edited by Robyn Ochs, the British science fiction television series *Torchwood*, and icons including British singer and activist Tom Robinson, The Black Eyed Peas member Fergie, Scottish actor Alan Cumming and American performance artist and activist Lady Gaga.

The bisexual pride flag flag was designed by Michael Page

Many bisexual, fluid and pansexual people consider themselves to be part of the LGBT or Queer community, despite any discrimination they face.



The bisexual pride flag was designed by Michael Page in 1998 in order to give the bisexual community its own symbol comparable to the Gay pride flag of the larger LGBT community. His aim was to increase the visibility of bisexuals, both among society as a whole and within the LGBT community.



The Transgender Pride flag was created by Monica Helms (a transgender woman) in 1999, [and was first shown at a pride parade in Phoenix, Arizona, United States in 2000. The flag represents the transgender community and consists of five horizontal stripes: two light blue, two pink, and one white in the center. Helms describes the meaning of the transgender flag as follows: "The stripes at the top and bottom are light blue, the traditional color for baby boys. The stripes next to them are pink, the traditional color for baby girls. The stripe in the middle is white, for those who are intersex, transitioning or consider themselves having a neutral or undefined gender. The pattern is such that no matter which way you fly it, it is always correct, signifying us finding correctness in our lives"

in 1998 in order to give the community its own symbol comparable to the Gay pride flag of the mainstream LGBT community. The deep pink or rose stripe at the top of the flag represents the possibility of same gender attraction; the royal blue stripe at the bottom of the flag represents the possibility of different gender attraction and the stripes overlap in the central fifth of the flag to form a deep shade of lavender or purple, which represents the possibility of attraction anywhere along the entire gender spectrum.

Additionally, Celebrate Bisexuality Day has been observed on September 23 by members of the bisexual community and their allies since

Transgender Culture

The study of transgender culture as such is complicated by the many and various ways in which cultures deal with gender. For example, in many cultures, people who are attracted to people of the same sex — that is, those who in contemporary Western culture would identify as gay, lesbian, or bisexual — are classed as a third gender, together with people who would in the West be classified as transgender or transsexual.

In the contemporary West, there are usually several different groups of transgender and transsexual people, some of which are extremely exclusive, like groups only for transsexual women who explicitly want sex reassignment surgery, or male, heterosexual-only cross-dressers. Transmen's groups are often, but not always, more inclusive. Groups aiming at all transgender people, both transmen and transwomen, have in most cases appeared only in the last few years.

Some transgender or transsexual women and men however do not classify as being part of any specific “trans” culture, however there is a distinction between transgender and transsexual people who make their past known to others and those who wish to live according to their gender identity and not reveal this past, stating that they should be able to live in their true gender role in a normal way, and be in control of whom they choose to tell their past to.

Youth Culture

Youth Pride, an extension of the Gay pride and LGBT social movements, promotes equality amongst young members (usually above the age of consent) of the Lesbian, Gay, Bisexual, Transgender, Intersex, and Questioning (LGBTIQ) community.

The movement exists in many countries and focuses mainly on festivals and parades, enabling many LGBTIQ youth to network, communicate, and celebrate their gender and sexual identities. Youth Pride organizers also point to the value in building community and supporting young people as they are more likely to get gay bashed and bullied.

Schools that have a Gay-Straight Alliance (GSA) handle issues of discrimination and violence against LGBTIQ youth better than schools that do not because they help develop community and coping skills and give students a safe-space to get health and safety information. Sometimes the groups avoid labeling young people and instead let them identify themselves on their own terms “when they feel safe”.

Gay and lesbian youth bear an increased risk of suicide,

substance abuse, school problems, and isolation because of a “hostile and condemning environment, verbal and physical abuse, rejection and isolation from family and peers” according to a U.S. Task Force on Youth Suicide report. Further, LGB youths are more likely to report psychological and physical abuse by parents or caretakers, and more sexual abuse. Suggested reasons for this disparity are that:

1) LGBT youths may be specifically targeted on the basis of their perceived sexual orientation or gender non-conforming appearance, and.

2) “risk factors associated with sexual minority status, including discrimination, invisibility, and rejection by family members... may lead to an increase in behaviors that are associated with risk for victimization, such as substance abuse, sex with multiple partners, or running away from home as a teenager.”

A 2008 study showed a correlation between the degree of rejecting behavior by parents of LGB adolescents and negative health problems in the teenagers studied. Crisis centers in larger cities and information sites on the Internet have arisen to help youth and adults.

3.0

Factors

&

Outcomes

Word cloud containing terms: Friends, Lesbian, Gay, Transgendered, Family, Bisexual, Queer, Creative, Comical, and others.

When people don't know much about a subject or group of people, they tend to make assumptions and jump to all sorts of conclusions without finding out the truth. This leads to a lot of common myths forming. LGBT people are still hugely under-represented in the media and information about being LGBT can still be hard to find. Below is a list of some of the myths surrounding LGBT people.

Myth: Being lesbian, gay or bisexual is just a phase.

Fact: Lots of people do experiment with their sexuality, but for lesbian, gay and bisexual people, being attracted to the same gender or both genders all their life is no different to straight people being attracted to the opposite sex.

Myth: Being lesbian, gay or bisexual is a choice/lifestyle.

Fact: People do not choose who they are attracted to, whether they are lesbian, gay, bisexual or straight.

Myth: Lesbian, gay and bisexual people can be cured.

Fact: There is no valid scientific evidence that shows a person's sexual orientation can be changed, but many experts have warned that trying to do so can be extremely damaging.

Myth: Being lesbian, gay or bisexual is unnatural.

Fact: There is nothing unnatural about being attracted to or loving someone regardless of their gender.

Myth: Being lesbian, gay or bisexual means you can't be religious.

Fact: Although some religions/ faiths still condemn being lesbian, gay or bisexual, lots of LGBT people are religious or follow the teachings of a religion.



Myth: Bisexual people are just confused.

Fact: Many people are attracted to both men & women all their lives and don't feel any more confused over their sexual orientation than anyone else.

Myth: Bisexual people are greedy.

Fact: Being attracted to both genders doesn't make a person greedy, it's no different from being attracted to one.

Myth: Bisexual people are just gay or lesbian people who haven't admitted it yet.

Fact: Some gay and lesbian people will identify as bisexual first as part of the coming out process but many people happily identify as bisexual all their life.

Myth: It's fashionable to be bi.

Fact: Some people may think its cool/fashionable to be bisexual, but this type of attitude can prevent people who are genuinely bisexual from being taken seriously. This links back to ideas of sexual orientation being a choice or a lifestyle that can be changed.

Myth: Lesbians/gay men fancy every woman/man they see.

Fact: Some lesbians/gay men will be attracted to lots of women/men and some just a few; most will be somewhere in the middle. Your sexual orientation has no direct relation to how many or how few people you are attracted to and is no different to heterosexual people's attraction to people of the opposite gender.



Myth: Lesbians/gay men are promiscuous and will try and jump into bed with every woman/man they meet.

Fact: Again, a person's sexual orientation has nothing to do with how many or how few partners a person will have.

Myth: All lesbians are butch/All gay men are camp.

Fact: Gay, lesbian and bisexual people are as varied as straight people. Some lesbians will be butch and some won't. Some gay men will be camp and some won't. You should never feel pressure to act a certain way or change how you behave just because of your sexual orientation.

Myth: All people who are transgender need to undergo surgery.

Fact: Being transgender means different things to different people- everyone's journey is different.

Myth: Trans people are gay.

Fact: Being trans is about gender not sexuality – trans people can be gay, straight or bi.

Myth: You only get trans women, you don't get trans men.

Fact: There are lots of trans men but currently, trans women have received more media attention.

Myth: Transgender identities are immoral.

Fact: Many trans people have faith and there are a growing number of trans friendly places of worship.



Myth: Surgery/hormones will mean your body will change overnight.

Fact: Everybody's body changes differently and at different paces. There's no set timeline.

Myth: All trans people stick out like sore thumbs.

Fact: Everybody is different whether they are trans or not.

Myth: If you are a cross-dresser or gender queer you want to change gender.

Fact: Not all trans people want to change their gender; it's about the person being happy and doing what makes them feel comfortable.

Myth: All trans people are confused.

Fact: Trans people are no more confused or no less confused than anyone else.

Myth: Being transgender is a choice.

Fact: Being trans is no more a choice than being tall, straight or black. Trans people however have to choose how honest they are with themselves and others.

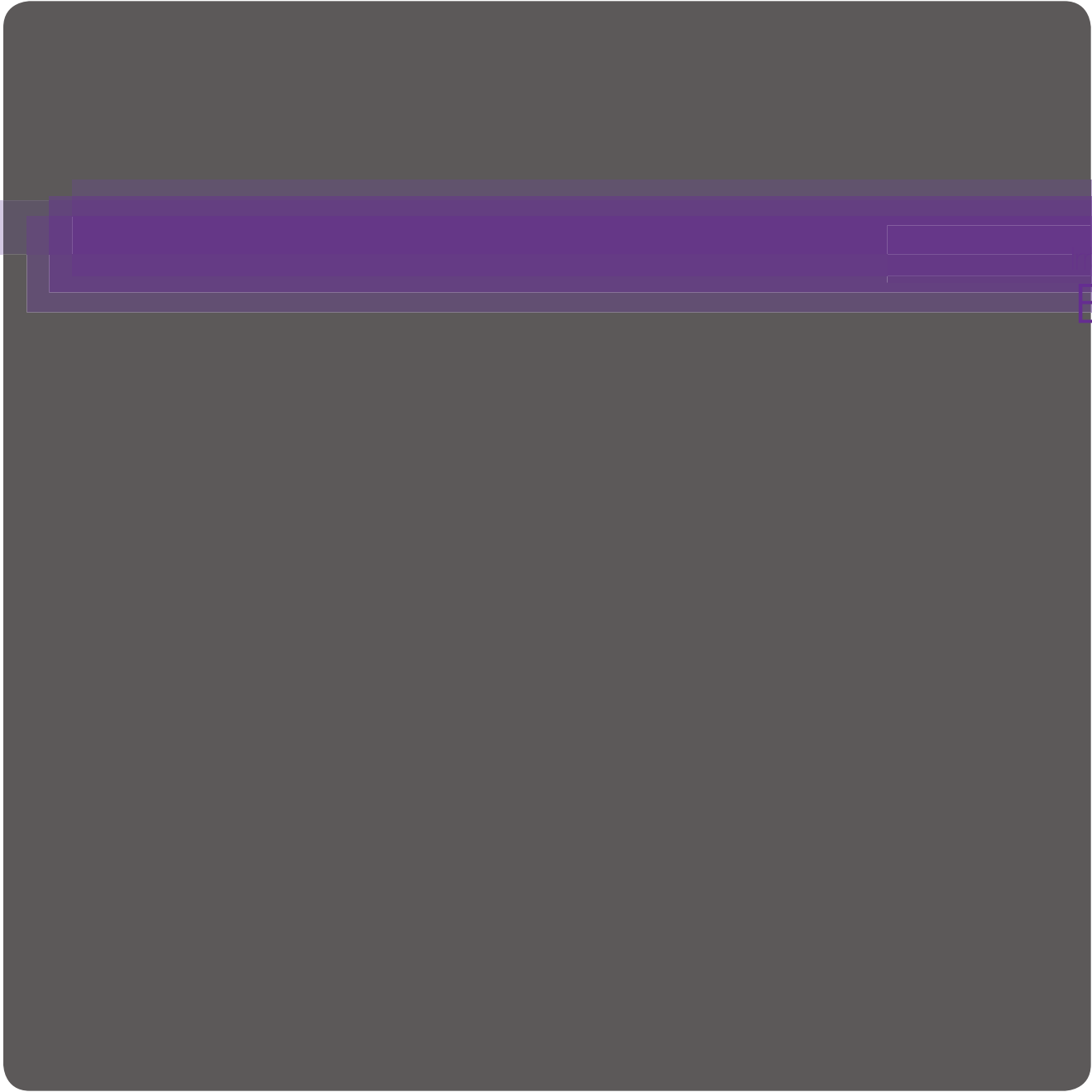
Myth: All trans people are depressed and unhappy.

Fact: Many trans people live happy, successful and fulfilled lives.

Myth: If you are transsexual and haven't had surgery you shouldn't want to have sex.

Fact: Some transsexual people will still have sexual feelings and still want to have sex – it's whatever feels right for you.





Friends
Lesbian
Gay
Transgendered
Bisexual
Family

4.0

Updated

Having, active enjoyable and healthy sex is an important part of life for many people, young, old, middle aged, whether heterosexual, gay, lesbian, bisexual and from every race and colour.

Looking after your sexual health is an essential part of an enjoyable sex life. This section of the site gives you general information to help you look after your sexual health.

Talking About Sex

Great sex doesn't depend on you or the other person being an expert, it depends on two people being comfortable to explore and enjoy each other. It can be difficult and embarrassing, and it isn't always easy to talk to your partner(s) about sex in general and particularly about what is important for you during sex. But the more you talk about sex with your partner(s) the easier it becomes to discuss the sex you really want.

Think about what you want – think about what you like.

Don't be afraid to say 'Yes' or 'No' depending on what feels right for you.

Be prepared to negotiate and agree to practice safer sex.

Tell your partner what you like as well as being clear about what you don't like.

It is ok to say no

It is ok to refuse someone and say no.

It is ok to say 'stop I've changed my mind, I don't want to take this any further'.

*For
Sexual Health /
G.U.M. Services
See Page ***



It is ok to say 'I am not having sex without a condom'. You have the right to change your mind, no matter how far you have or haven't gone. You may need to say 'No' verbally and non-verbally. The clearest way to say 'No' is to walk away or remove yourself from the situation. Sex against your will is considered sexual assault or rape. If this happens you can do something about it. Talk to a health worker or contact a rape crisis centre. www.rcni.ie

In the U.K the age of consent is 16 and in Ireland the age of consent is 17 – a person is not legally old enough to agree to have any form of sex until they are at the correct legal age.

Sexuality

Everyone is a sexual being whether they are sexually active or not. Sexuality is an expression of who you are as a human being. You experience and express your sexuality through your thoughts, fantasies, desires, beliefs, attitudes, values, activities, roles and relationships.

Your sexuality is a combination of your:

- biological sex (whether you were born as a male or female)
- gender identity (your psychological sense of being male or female)
- social gender role (the extent to which you conform to what is regarded in society as feminine or masculine behaviour)
- sexual orientation (the emotional, romantic, sexual or affectionate attraction you have to a particular sex)



Three sexual orientations are commonly recognised, heterosexual, gay/lesbian and bi-sexual.

Sexual orientation is different from sexual behaviour. Sexual behaviour is how people behave in a sexual situation, individuals may or may not display their sexual orientation in their sexual behaviour. Being heterosexual, lesbian, gay or bi-sexual is not a preference and is not chosen. It is integral to a persons life and their identity rather than being a lifestyle.

Your sexual orientation reflects a range of factors that determine who you are sexually attracted to and who you fall in love with.

Alcohol and Drugs

Alcohol and other drugs can affect your ability to have and enjoy sex. They can affect your judgement around having sex - making it more difficult:

- to judge the risks you are taking
- to set limits, and
- to remember your right to say no.
- Using alcohol and or other drugs increases your chance of having unprotected sex.

If you are worried about your alcohol or drug use you can find information and support at **www.drugs.ie**



Regular sexual health check-ups are important to help ensure you can continue to have and enjoy a healthy sex life. If you are not in a relationship or sexually active at present, it is still important to look after your sexual health.

A sexual health check-up includes; the information in the following pages.

For Men

STI Screening

STI Screening means you are being tested for a full range of Sexually Transmitted Infections at the same time. A screening usually includes blood tests and swabs.

STI screening is free at an STI/GUM clinic. You will need to make an appointment for most clinics, unless they provide a drop-in service. See Page ** for contact details of your local clinic.

The service is completely confidential. You don't have to be referred by or have a letter from your GP.

Who should have an STI screening?

You should have an STI screening if:

- you are sexually active and have not had a check-up before;
- you have had unprotected oral, vaginal or anal sex with one or more partners;
- your sex partner has had unprotected sex with someone other than you; or



you have any unusual symptoms including:

- unusual discharge from your penis or vagina
- pain when passing urine
- unusual sores or blisters in the genital or rectal area
- itching or irritation in the genital area
- pain during sex.

Condoms protect against most but not all STIs. In fact, the only way to stay 100% protected from STIs is to abstain from sex altogether.

Remember that some STIs show no visible symptoms you won't always know if you need a check-up. If you are sexually active and you or your partner might be having sex with someone else you should plan to have a check up every 6-12 months.

What happens at an STI/GUM clinic?

An STI screening can take around two hours. First, a doctor will take your sexual history. Don't worry about shocking them – they've heard it all before. Then you will have a series of tests.

Blood tests are used test for HIV, Hepatitis B and Syphilis. Swabs are take to test for other viruses and bacteria. A swab is where a large cotton bud is rubbed over parts of your body to take a sample for testing. If you are having a HIV test, a health worker or doctor will talk you with you beforehand.

Results and treatment

You may be given some results while you are at the clinic.



For tests that take longer you will be given an appointment to come back for the rest of your results. If you need treatment, you will get the medication there and then. This is free of charge. A health worker will meet you to explain safer sex practices, answer any questions you may have and discuss your results.

What men should expect

You will be asked not to urinate for at least four hours before your appointment. You may have a throat swab, penis swab and anal swab.

What women should expect

You may have a throat swab, vaginal swab, a cervical swab and anal swab.

Testicular checks

Why should I check my testicles?

You should check your testicles regularly to make sure you are aware of how they normally feel. This means that you will be able to notice any unusual changes that might happen. It can help you notice any changes or lumps that might be testicular cancer.

What is testicular cancer?

Testicular cancer is rare and can be treated. With around 100 cases each year, however, it is the most common cancer in young men aged between 15 and 34 in Ireland, and this number is increasing steadily. If you have had an undescended testicle(s) – where the



testicle(s) fail(s) to move down into the scrotum after birth – your risk of testicular cancer is significantly higher. You also have a higher risk if your father or brother(s) have had testicular cancer. You should check your testicles for any changes about once a month, while in the bath or shower.

How do I check?

Checking your testicles is straightforward and doesn't take long so make sure to check them regularly. It is best to do it once a month, while in the bath or shower.

Cradle your scrotum in both hands and use your fingers and thumbs to examine and compare your testicles.

Testicles should feel smooth with no lumps, swellings or hardness present. Small differences in size are normal.

It is normal for one testicle to be lower than the other (this is just nature's way of allowing you to cross your legs without discomfort).

Gently feel each testicle, one at a time. At the top and back of each testicle, there is a soft rubbery tube which carries sperm to the penis. This is called the epididymis. It is normal for the epididymis to be tender and wobble. Lumps tend to be firmly fixed to the testicle.

If you notice something unusual... You should see your doctor if:

- you can feel a small lump or swelling in either testicle
- you notice any hardening of the testicle(s)
- you can feel a sensation of dragging or heaviness in your scrotum
- you experience dull aches in the groin
- you notice any smelly pus or blood in your semen.

Most lumps aren't cancer. But don't ignore a lump – let your doctor



decide whether or not you need further tests.

Prostate screening

What is the prostate?

The prostate is a walnut sized gland that sits just under your bladder. Its job is to produce a thick fluid that makes up part of semen (the fluid sperm swim in).

Why is it important to have a Prostate check-up?

Your prostate increases in size as you get older. This can cause symptoms such as:

- Difficulty passing urine;
- Having to pass urine more frequently;
- Getting up in the middle of the night to pass urine;
- Feeling that you haven't quite emptied your bladder after passing urine;
- Stopping and starting when passing urine;
- Discomfort or burning when passing urine; or
- Blood in urine or semen.

The most common cause of these symptoms is a condition called Benign Prostatic Hypertrophy (BPH). This happens when as the prostate increases in size and puts pressure on the urethra (the tube that takes the urine from the bladder to the penis). BPH is not cancer, however it can be uncomfortable and distressing.

Cancer can also cause the prostate to change size or shape, leading to the same symptoms as BPH. Prostate cancer is the second



highest cancer in men in Ireland. The chance of a man getting prostate cancer is only 2% less than the chance of a woman getting breast cancer (1 in 11 Irish women have a chance of getting breast cancer during their life).

What does a Prostate check-up involve?

Your doctor will carry out a physical examination and do a blood test for PSA (Prostate Specific Antigen). If your levels of PSA are high you doctor may refer you for further tests.

Who should have a Prostate check-up?

If you have any of the symptoms listed above you should speak to your doctor about a Prostate check-up. Men who are 50 years and older should have regular check-ups. Prostate cancer is rare in men under 50 years of age.

If your father or brother had prostate cancer, it increases your risk. You should speak with your doctor about regular Prostate check-ups whatever your age.

For Women

STI screening: See Page **

Smear tests

What is it?

A smear test, sometimes called a Pap Test, checks to see if your cervix is healthy. It isn't a test for cancer, but it does help prevent

cancer by taking a sample of cells to look for early changes in the cells of the cervix. If such changes are not found and treated, these cells could become cancer cells.

Who should have a smear test?

All women between the ages of 25 and 60, who are or have been sexually active, should have regular smear tests. Lesbian and bisexual women should have regular smear tests also. You should have a smear test even if you are not sexually active now. Women younger than 25, who are sexually active, should also have regular smear tests.

Why should I have a smear test?

Every year, about 180 women in Ireland are diagnosed with cervical cancer. Smear tests help identify changes to the cells of the cervix. If these changes are not found and treated they could become cancer cells. Regular smear tests help prevent cervical cancer. For more information on cervical cancer, call the Irish Cancer Society National Cancer Helpline free on 1800 200 700 or visit www.cancer.ie

How often should I have a smear test?

You should have a regular smear test every 3 – 5 years.

Where can I get a smear test done?

The Irish Cervical Screening Programme (ICSP) offers a free smear test every 5 years to any woman aged between 25 and 60. Visit the ICSP website or freephone 1800 252 600 to register with the ICSP or to find out where you can have your free smear test done. If



you are not eligible for the Cervical Screening Programme there are a number of ways you can get a smear test done:

- through a GP or Practice Nurse
- at a family planning clinic
- at a Well Woman centre
- in some HSE clinics – contact your local Health Office. local health office contact details
- in some gynaecology clinics in hospitals – contact your local hospital. local hospital contact details
- When should I get a smear test done?

The best time to go for your smear test is mid-cycle – that is 10 to 14 days after the first day of your last period (if you are having periods).

How much does a smear test cost?

If you are aged between 25 and 60, you can have a free smear test done every 5 years through the ICSP (see above). If you are under 25 or over 60, check with your local GP, family planning clinic or Well Woman clinic. Medical card holders can have a smear test done by their GP or Practice Nurse for a small fee.

What does a smear test involve?

The test is short, often taking less than 5 minutes, and is usually done by a doctor or a nurse. A sample of cells is taken from the skin that covers the cervix using a small brush. These cells are later checked for any changes that could turn them into cancer cells.



Where is my cervix?

Your cervix is found at the lower part of your womb (uterus) at the top of your vagina. A small opening in the cervix leads into the main part of your womb. Sperm can pass through this opening after unprotected vaginal sex, and menstrual blood flows through there during your monthly period.

Being Breast Aware

What is it?

Being Breast Aware means that you know how your breasts normally look and feel like, so that if any unusual change happens, you will recognise it.

Why is it important?

It is important to know what is normal for your breasts, so that it is easier for you to notice unusual changes.

Breast cancer is one of the most common cancers in women in Ireland. 1 in 11 Irish women have a chance of developing breast cancer in their life. The earlier it is diagnosed and treated, the better the outcome for you.

When should I begin being breast aware?

All women, whatever their ages, should be Breast Aware. If you don't look at and feel your breasts regularly now is the time to start.



How do I become Breast Aware?

Know what is normal for you.

Know what changes to look for.

Look and feel.

Discuss any changes with your GP without delay.

Attend for routine breast screening after the age of 50.

Know what is normal for you

Your breasts will go through many normal changes during your life. For example, they are affected by changes in your hormones during the following times:

The menstrual cycle: each month, when you are having periods, your breasts often change. They can become bigger, tender and lumpy usually before a period starts and return to normal once the period is over. Some women may have tender, lumpy breasts throughout their cycle.

Pregnancy and breastfeeding: the changes that happen during your menstrual cycle can also happen during pregnancy. While breastfeeding your breasts may be very enlarged, firm and tender; this is normal at this time. However, you should continue to be breast aware and discuss unusual changes with your GP.

The menopause: after the menopause your breasts will feel softer and they may be bigger or smaller. HRT (hormone replacement therapy) may cause your breasts to feel firmer and quite tender.



Know what changes to look and feel for:

- Change in size or shape – one breast may become larger than the other.
- Changes in the nipple – in direction or shape, pulled in or flattened, or unusual discharge.
- Changes on or around the nipple – rash, flaky or crusted skin.
- Changes in the skin – dimpling, puckering or redness.
- ‘Orange peel’ appearance of the skin caused by unusually enlarged pores.
- Swelling in your armpit or around your collarbone.
- A lump, any size, or thickening in your breast.
- Constant pain in one part of your breast or armpit.
- Look at and feel your breasts regularly:

Look - One way to look is to use a mirror so that you can see your breasts from different angles.

Feel - An easy way to feel your breasts is with a soapy hand in the bath or shower.

Discuss any changes with your GP without delay.

If you do notice any change in your breast, discuss them with your GP without delay. Most breast changes are not cancer and will probably be harmless. Ask your GP to explain what the changes may be. Attend for routine breast screening after age 50. BreastCheck is the national breast screening service for all women aged 50 – 64. It is free, and takes approximately 30 minutes.



The aim of BreastCheck is to detect breast cancer early. The majority of women screened are healthy. Breast cancer is very treatable if found early – so having a BreastCheck is the best start.

For information on the service, to register for an appointment or to check you are on the register log onto **www.breastcheck.ie** or freephone **1800 45 45 55**

HIV Testing

What is an HIV test?

Usually this involves taking a small amount of blood from your arm. The test looks for antibodies to HIV in your blood. Antibodies are produced when your body detects an infection, like a virus. However, it can take up to three months for your body to produce enough HIV antibodies to give a positive test result.

We recommend you attend an STI/GUM clinic for a HIV test.

You might want to test if:

- You had vaginal or anal intercourse without a condom
- You took cum/fluids/blood in your mouth
- You had difficulties with a condom during sex (it tore or slipped off)
- You engaged in any form of sexual activity that involved drawing blood
- You received blood or blood products before 1986
- You have shared needles
- You tested a long time ago



You are in a relationship and you and your partner want to stop using condoms
You want to have a child (or donate sperm)
You just want to be sure

What if I'm negative?

A negative result means that the antibody to HIV was not identified in your blood. This can mean two things:

- You have not been infected with HIV,
- Or it is too soon after your last risk for the test to be conclusive. This is known as the 'window period'. To have a conclusive test, it's advisable to test at least 3 months after your last risk.

A negative result does not mean that you're immune to HIV. You could be infected in the future if you put yourself at risk. Have a look at other safer sex information to learn more about protecting yourself from HIV in the future.

A negative result for you doesn't mean your partner is negative.

Why might I have to wait three months?

After someone has been infected with HIV, it can take up to three months for antibodies to HIV to develop. The test involves looking for these antibodies to HIV in your blood. If you test within three months of your last risk, you might get an HIV negative result, which in fact, may be incorrect. This period between the last risk and the development of antibodies to HIV is known as the 'window period'. With most people the HIV antibodies takes three months to



show, in very rare cases it can take six months to show up.
During this window period, you should continue practicing safer sex.

What if I'm positive?

A positive HIV test means that you have been infected with HIV, the virus which can cause AIDS. You will be referred to a specialised HIV centre for ongoing monitoring, and, if necessary, treatment for HIV. While waiting to see your new HIV specialist we advise you consider psychological or peer support which will help you with whatever worries you may be having. It will also reassure you that you are not alone.

Currently, there is no cure for HIV. But don't despair. Things have changed for the better. Now, by treating HIV with special drugs before any symptoms of AIDS appear, it will alter the course of the disease, to improve and extend your life expectancy. These anti-viral drugs have given HIV positive people new hope. Basically this means, that in a person who takes their anti-viral drugs as prescribed, the level of HIV (viral load) in the blood can be kept very low. Allowing the immune system to be restored to almost normal levels.

Most newly diagnosed HIV positive people don't need to start taking medication straight away. With good advice and support you may not need medical interventions for some years. In some treatment centres you can avail of specialised psychological supports. You will also be informed of the nearest support organisations if you wish to use them. People who are trained to provide you with support will be aware of all the issues which might be going through your head.



What if the result is unclear?

In a very rare number of tests, the initial assessment is unclear. It could mean that the antibodies to HIV are still developing, but equally, it can have nothing to do with HIV. Usually it has something to do with technical difficulties or some other problem with the blood. These uncertainties occur very rarely and are sorted out over a few weeks. You will be advised to have another test by the doctor some weeks later and you should be offered support by the counsellor. If there is none available, contact one of the agencies listed.

If you are HIV positive, it's better to find out sooner rather than later.

What are the issues involved in having an HIV test?

There are many possible issues involved having an HIV test. Some are easy to deal with, some are very difficult to deal with. Some of these could be:

- For those who are HIV negative, knowing this can put your mind at rest
- If you are HIV negative you can continue planning a healthier sex life while protecting yourself and others
- Knowing that you are HIV positive while still healthy can greatly increase your life expectancy, also your options around treatment should you need medical interventions.
- If you know that you are HIV positive, you can plan for a



healthier sex while protecting yourself and others.

- HIV is a virus, not a moral judgement. Sadly, there is still a stigma associated with being HIV positive which can lead to difficulties with your partner, family, friends or in the workplace . Accessing professional or peer support can help you greatly.
- If you test HIV positive, it doesn't mean that your current sexual partners are positive too. But if you have had unprotected sex with them, it would be advisable that they are also given the opportunity to test
- You may wish to tell, any of your known previous sexual partners. Do seek support before you tell. HIV, by law, is not a notifiable disease
- Insurance companies should not discriminate against you for having an HIV test. Many companies require applicants to test. However, if you are HIV positive you will have difficulties getting certain types of insurance and assurance. You might want to look for further advice on this and have a test at a clinic before seeking insurance
- Some people would rather not know if they are HIV positive. They feel that they would not be able to cope if they knew that they were HIV positive. In reality, most people living with HIV with good support, advice and education cope well, and have found a good quality of life including a healthy sex life.

HIV and Worry

The thought of being HIV positive can cause a lot of worry. Sometimes you can become really worried, despite the fact that you did not put yourself at risk.



Do you:

- Go for HIV tests over and over again, even though you have been given negative results?.
- Worry about having put yourself at risk, when you might not have done so?
- Find that worry is affecting your health, your relationships or other areas of your life?.

Worry can be very distressing and can effect how you feel both in body and mind. Talking about your fears and worries with someone may be helpful. If you think you are worrying too much, it might be worth talking with a counsellor, health worker or contact a telephone helpline.

Where can I test?

Testing takes place at sexually transmitted infections/genetounary medicine (STI/GUM) clinics throughout Ireland or at the Baggot Street Clinic, Dublin 4. We advise attending a STI/GUM clinic as you can avail of other sexual health screenings while there. At some clinics pre- and post-test counselling is available. Testing is free at all clinics, and it usually takes two weeks before you can collect your results. The various testing sites are listed at the back of this booklet.

Before you do it, make sure you are aware of the policies and procedures for HIV testing in the centre that you have chosen. Some doctors, General Practitioners (GPs), also provide HIV testing, but your results will be noted in your medical records. Also, some GPs may not be familiar with pre- and post-test counselling. If your only option is to visit a GP, then instead of going to your own you



could visit a GP not previously known to you. Talk with someone on the telephone or to a friend before you decide. The test is free, but GPs will charge you a consultation fee unless you have a medical card. HIV is not an Notifiable Disease

Home Testing?

Rapid HIV or home testing kits, are available in some countries. At the date of this publication, they have not been licensed for sale in Ireland. A negative result from these kits means the same as other negative tests. It is important to note that a positive result from such a kit should be confirmed in a specialist laboratory, since it may give a wrong reading. We recommend you do not test alone.

Is the test confidential?

If you have an HIV test in a STI/GUM clinic or Baggot Street Clinic, the test is confidential. The blood will be sent to the laboratory with some identifying information, such as a date of birth, initials and a medical chart number.

If you are HIV positive only the clinic or hospital will have your details and cannot give them to anyone else without your consent, although all positive cases are recorded for reports by use of special codes. You cannot be identified.

What is Informed Consent?

Informed Consent means you have a right to be fully informed about any medical procedure, to refuse it or to agree to it. You should be asked to read or to acknowledge a statement saying that you



have been informed about the HIV antibody test procedure, you understand any implications, and that you consent to having it done.

Are You New To Ireland?

Regardless of your legal status or where you are from you can get a free HIV test from any STI/GUM clinic where you can also have a free sexual health screen and treatment. Or you can have the HIV Test only at Baggot Street clinic. Testing at these clinics is confidential and information about your visit cannot be accessed by others.

So what will I do now?

Every person's situation is different -only you can make the decision after seriously considering your own. There are valid reasons why some people choose not to test. In light of treatments currently available we would encourage you to test.

STI Facts

Sexually Transmitted Infections (STIs) are infections that are passed on from an infected partner(s) during unprotected sex (vaginal, anal and oral). They are caused by specific bacteria and viruses. In some cases, you may be at risk even if you don't have full sex. Kissing and touching each other's genitals may pass on some STIs. Some people refer to STIs as STDs or sexually transmitted diseases.

There are many different STIs – some are more common than others. Most can be cured with medication. However, some of them can only be treated to reduce symptoms but will stay in your system once you have been infected.



Types Of STI's

Pelvic Inflammatory Disease

Description: It is usually a complication of chlamydia and gonorrhoea in women but may also be caused by bacterial vaginosis and other infections.

Effects: The infection can spread to the reproductive system and surrounding area. Infertility. Ectopic pregnancy. Long term pain.

Cause: Unprotected vaginal, anal or oral sex. Intimate genital contact.

Symptoms:

- Pain in your lower abdomen. Pain during sex.
- Abnormal bleeding between periods.
- Painful periods.
- Abnormal vaginal discharge.

Treatment: Antibiotics.

Pubic Lice (crabs)

Description: They are tiny insects, like head lice, that live in pubic or body hair.

Effects: The itching will continue and get worse.

You can pass it on to your sexual partner(s).

Cause: Close body contact with an infected person.

Rarely, infected bed linen or clothes may pass on the lice.

Symptoms:

- Itching in your pubic hair.
- You may be able to see the lice.



Treatment: It can be treated with creams and lotions – for you and your partner(s).

You can buy these at a chemist, however, you should also have a full STI check.

Prevention: Don't have intimate sexual contact.

Using condom may not protect you against pubic lice.

Thrush (Candida)

Description: It is a yeast infection. Yeast is common around the mouth and genitals, especially the vagina, but does not cause symptoms until it multiplies. It is not considered a sexually transmitted infection, but it can be passed on through sexual contact.

Effects: You can pass it on to your sexual partner(s).

Symptoms can go away without treatment.

Cause: Unprotected vaginal, anal or oral sex.

Symptoms:

- Genital itching or soreness.
- Thick vaginal discharge usually with no smells.
- Discomfort during sex.
- You may have no symptoms.

Treatment: Thrush is treated with anti-fungal creams, vaginal pessaries or prescribed tablets.

- Avoid using soaps in the genital area.
- Pregnancy and antibiotics may make it worse.

Prevention: Don't use perfumed soaps, sprays or shower gels around your genital area.

- Wear cotton underwear.
- Eat a healthy varied diet.



Trichomonas Vaginalis (TV)

Description: It is a parasitic infection.

Effects: You can pass it on to your sexual partner(s). It may cause problems in pregnancy such as premature labour and low birth weight.

Cause: Unprotected vaginal, anal or oral sex. Intimate genital contact.

Symptoms: Infected women may have no symptoms and around 50% of infected man may have no symptoms.

Women:

- Abnormal vaginal discharge.
- Vaginal discomfort.
- Burning or stinging sensation when you pass urine.
- Offensive smell.

Men:

- Discharge from penis.
- Rash on the penis.
- Rarely, burning or stinging sensation when you pass urine.

Treatment: Antibiotics – for you and your partner(s).

Prevention: Don't have intimate sexual contact.

Or

Have safer sex – always use a new condom correctly and put it on before you have sex.



Molluscum Contagiosum

Description: It is a viral infection caused by the molluscum contagiosum virus.

Effects: You can pass it on to your sexual partner(s).

Cause: Direct skin-to-skin contact.

Vaginal, oral or anal sex (protected or unprotected).

Symptoms:

Pearly smooth fluid-filled bumps on your skin.

They are most common in the genital area, the inner thighs and the lower abdomen.

Treatment: Freezing the lumps using a special technique. The virus stays in your system so the lumps may come back.

Prevention: Don't have intimate sexual contact.

Or

Have safer sex – always use a new condom correctly and put it on before you have sex.

Syphilis

Description: It is a bacterial infection.

Effects: You can pass it on to your sexual partner(s).

You can pass it on to your baby during pregnancy.

Cause:

- Intimate genital contact.
- Unprotected vaginal, anal or oral sex.
- Unprotected rimming (mouth to anus contact).
- Kissing an infected person.
- From an infected pregnant mother to her baby.



Symptoms: There are three stages to the infection and the symptoms are the same for men and women.

Stage 1 – Primary infection

Incubation period: 9 to 90 days

Symptoms: Usually appear around three weeks after exposure as a painless ulcer (similar to a cold sore) in the genital, anal or mouth area.

Stage 2 – Secondary infection

Incubation period: 6 weeks to 6 months

Symptoms: Red spotty rash develops, typically on the palms of your hands and the soles of your feet, but it may also appear elsewhere on your body.

Stage 3 – Tertiary syphilis

Incubation period: Can happen months or years after initial infection

Symptoms: Rare, but there is a possibility of long-term damage to your heart and brain.

Treatment: Antibiotics – for you and your partner.

Follow-up blood tests to make sure the infection is cleared.

Prevention:

Don't have intimate sexual contact.

Or

Have safer sex – always use a new condom correctly and put it on before you have sex.



Scabies

Description: It is a parasitic mite.

Effects: It spreads and the symptoms get worse.

You can pass it on to your sexual partner(s).

Cause: Close body contact with an infected person

Rarely, infected bed linen or clothes may transmit the mite.

Symptoms:

Itching, especially at night.

Silvery lines on your skin and between your fingers.

Treatment: It can be treated with lotions – for you and your partner(s).

Prevention: Avoid skin-to-skin contact with an infected person.

Hepatitis B

Description: It is a viral infection that affects the liver and blood.

Effects: Long term complications can include liver failure and cirrhosis of the liver. Increased risk of miscarriage or premature labour. You can pass it on to your baby during pregnancy.

Cause:

- Through blood and other body fluids.
- Unprotected vaginal, anal or oral sex.
- From an infected mother to baby during pregnancy.
- Sharing drug using equipment with an infected person.
- Tattoos, acupuncture and piercings with non-sterilised equipment.



Symptoms:

- Flu-like symptoms.
- Fever.
- Jaundice (yellow colouring of the eyes and skin).
- Nausea.
- Tiredness.

Around 10-50% of people infected have no symptoms.

Treatment:

- You may need medical treatment.
- You should stop or reduce the amount of alcohol you drink to reduce further strain on your liver.

Prevention:

- Get a Hepatitis B vaccination free from your GUM/STI clinic.
- Don't share needles with drug users.
- Don't have intimate sexual contact. Or
- Have safer sex – always use a new condom correctly and put it on before you have sex.

Hepatitis A

Description: It is a viral infection that affects the liver and blood.

Effects: You can pass it on to your sexual partner(s).

Cause: Unprotected rimming (mouth to anus contact).
Through contaminated food or water.

Symptoms: Around 50% of people infected have no symptoms. Flu-like symptoms.

- Jaundice (yellow colouring of the eyes and skin).
- Nausea.
- Tiredness.



Treatment: You may need medical treatment.

Prevention: Get a Hepatitis A vaccination free from your GUM/STI clinic. Don't have intimate sexual contact.

Or

Have safer sex – always use a new condom correctly and put it on before you have sex.

Chlamydia

Description: It is a bacterial infection.

Effects: You can pass it on to your sexual partner(s). It can lead to problems such as pelvic inflammatory disease and infertility.

You can pass the infection to your baby during birth. It can cause premature labour and low birth weight.

Cause:

- Intimate genital contact.
- Unprotected vaginal, anal or oral sex.
- Infected fingers to eyes.
- Unprotected rimming (mouth to anus).
- From a pregnant mother to her baby.

Symptoms: In around 80% of women and 50% of men with chlamydia will have no symptoms.

Women:

- Abnormal vaginal discharge
- Stinging or burning sensation when you pass urine.
- Bleeding between periods or heavy periods
- Pain or bleeding during or after sex



Men:

- Discharge from penis
- Stinging or burning sensation when you pass urine.

Treatment: Antibiotics – for you and your partner(s).

Prevention: Don't have intimate sexual contact. Or Have safer sex – always use a new condom correctly and put it on before you have sex.

Bacterial Vaginosis [BV]

Description: It is a condition caused by the overgrowth of normal vaginal bacteria.

Effects: It can cause problems in pregnancy such as premature labour and low birth weight. It can contribute to pelvic inflammatory disease especially if you have a contraceptive coil in place.

Cause: Exact cause is not known. It affects women with many sexual partners and new sexual partners. It may be triggered by sexual intercourse or a period.

Symptoms:

- No symptoms in most cases.
- Abnormal vaginal discharge and smell.
- Genital itching.

Treatment: Antibiotics.

Prevention: It is likely to come back in about one-fifth of cases, especially after your period or after sex. Don't use harsh soaps, antiseptics and sprays in the vaginal area, as they can disrupt your vagina's normal balance.



HIV (Human Immunodeficiency Virus)

Description: It is a virus caused by the Human Immunodeficiency Virus).

- Effects:**
- You can pass it on to your sexual partner(s).
 - You can infect your baby during pregnancy and birth.
 - You may get AIDS (Acquired Immuno-deficiency Syndrome). This happens when the virus breaks down your immune system until it gets to a stage when you cannot fight certain infections.

- Cause:**
- Unprotected vaginal, anal or oral sex.
 - From a HIV positive mother to her baby during pregnancy, at birth or in breast milk.
 - Sharing drug using equipment with an infected person.

Symptoms: There are usually no obvious symptoms in the early years.

Treatment: Prescribed HIV medication.

- Prevention:**
- Don't have intimate sexual contact.
 - Have safer sex – always use a new condom correctly and put it on before you have sex.
 - Don't share needles.
 - If you are pregnant or planning pregnancy, have a HIV test.



Herpes

Description: It is a virus caused by the Herpes Simplex Virus (HSV). There are two types, HSV 1 and HSV 2.

Cause: Direct skin-to-skin contact.
Unprotected vagina, anal or oral sex.
Unprotected rimming (mouth to anus).
From a pregnant mother to her baby.

Symptoms: Most people who carry the virus have no symptoms. During an outbreak you may have: Flu-like symptoms
Painful blisters or ulcers on your external genitals and rectum
A burning sensation when you pass urine.

Treatment: Prescribed medication can reduce discomfort during an outbreak. The virus will stay in your system, so you may have further outbreaks. These outbreaks are usually less severe.

Prevention:

- Don't have sex while you or your partner(s) has an outbreak.
- Don't have intimate sexual contact. Or
- Have safer sex – always use a new condom correctly and put it on before you have sex.

Genital Warts (Human Papilloma Virus, HPV)

Description: It is a virus caused by the Human Papilloma Virus (HPV).

Effects: Some types of the virus are associated with cervical cancer in women, so you should follow up with your doctor for a smear test.

Cause: Direct skin-to-skin contact. Vaginal, anal or oral sex (protected and unprotected).



Symptoms: The virus can be in your system for 3 weeks to 8 months (or longer) before you show symptoms. Warts usually appear as single or more painless, fleshy growths or lumps in the genital area. They come in different shapes and sizes.

You may not have visible warts, but can still pass the virus on to your sexual partner(s).

Treatment: There are a few treatments available, such as freezing the warts and prescribed creams. The type of treatment will depend on the size, location and number of warts.

The virus will stay in your system, so the warts may come back.

Prevention: Don't have intimate sexual contact. Using a condom may not protect you against genital warts

Gonorrhoea

Description: It is a bacterial infection.

Cause: Intimate genital contact.

Unprotected vaginal, anal or oral sex.

Infected fingers to eyes.

Unprotected rimming (mouth to anus contact).

From an infected mother to her baby at birth.

Treatment: Antibiotics – for you and your partner(s).

Prevention: Don't have intimate sexual contact.

Or

Have safer sex – always use a new condom correctly and put it on before you have sex.



- Effects:**
- You can pass it on to your sexual partner(s).
 - You can pass it on to your baby at birth.
 - It can cause problems such as pre-term labour and low birth weight.
 - Other long term complications include pelvic inflammatory disease and infertility.

Symptoms: Around 70% of women and 5-10% men who are infected will have no symptoms.

Women: Abnormal vaginal or anal discharge
Burning or stinging sensation when you pass urine
Pain during or after sex
May be bleeding between periods.

Men: Abnormal discharge from penis
Burning or stinging sensation when you pass urine



What is HIV?

HIV stands for Human Immunodeficiency Virus. When HIV enters the bloodstream it begins to attack the immune system. Your body then produces antibodies to fight off infection. Although these antibodies cannot destroy HIV, their presence is used to confirm HIV infection. HIV tests look for antibodies not for the virus itself. Find out more about HIV testing.

Over time, if left untreated, HIV greatly affects your health. Your immune system becomes so damaged that it can no longer fight off infections and cancers that don't usually cause problems. AIDS (Acquired Immunodeficiency Syndrome) is the term used to describe these unusual symptoms or cancers in HIV positive people. HIV is not AIDS

How does someone get infected with HIV?

HIV is transmitted in blood, semen, vaginal fluids or breast milk. In Ireland, having unprotected sex or sharing needles with an infected person are the two main ways, in which people get HIV. If you have never shared needles, then this leaves sex as the main way of becoming infected. Having other sexually transmitted infections (STI's) such as syphilis or gonorrhoea can greatly increase the chances of becoming infected with HIV.

Vaginal Sex

You can pass on or get HIV through unprotected vaginal intercourse or if a condom is used and it bursts or slips off.



Anal Sex

You can pass on or get HIV through unprotected anal intercourse or if a condom is used and it bursts or slips off.

Oral Sex

A small number of people have been infected with HIV through oral sex. HIV is passed on when fluids; semen, vaginal fluids or blood a positive person gets inside an HIV negative person's mouth. Having sores, ulcers, bleeding gums or another STI (in particular, syphilis) can increase the chances of catching HIV. The risk for oral sex is not as high as the risk for unprotected vaginal or anal sex) but there is still a risk.

Washing teeth or using mouth wash before sex can increase the risk

Sex Toys

Sharing sex toys such as vibrators or dildos can facilitate the spread of HIV. If you share sex toys, cover them with a condom before use (or change the condom between sharing). Always wash the sex toy thoroughly after use.

Blood Donations

You cannot get HIV by giving blood. In Ireland, there is no risk in receiving blood or blood products as all donated blood is screened.

Safer Sex can prevent HIV



Protection Options

Sexually Transmitted Infections (STIs) can be passed on by contact with body fluids such as semen, vaginal fluids and blood. Some STIs can be passed on by unprotected genital contact and oral sex. Fingers, hands or sharing sex toys can also pass on certain STIs.

STIs can be a worry – but the good news is that you can reduce your risk by:

- Using condoms
- Limiting the number of partners you have – the more partners you have, the greater your chance of coming into contact with an infected person.
- Talking to your partner(s) about STIs and practicing safer sex.

Condoms

A condom can help protect you from most but not all STIs.

It is a good idea to:

Insist on using condoms until you and your partner are sure of each other's sexual health status and are in a mutually monogamous (one partner only) relationship. The only way to be sure of each other's sexual health status is to have an STI check-up

Insist on using a condom if you have sex with a new partner.

Use a condom with every partner (if you have multiple sex partners).

Limit the number of partners you have.



What a condom can do.

Using a condom can protect you against most but not all STIs. In fact, the only way to be 100% sure of protecting yourself from STIs is to avoid sex completely.

Using a condom can prevent pregnancy. With careful use of a male latex condom, 2 women in every 100 will get pregnant. With less careful use, 2 to 25 women in every 100 get pregnant.

What a condom can't do

A condom can't help protect you unless you use one. **It's up to you to negotiate using a condom with your sex partner(s)**

Oral sex

Oral sex – mouth to penis, mouth to vagina, mouth to anus.

- Use a condom or dental dam during oral sex.
- Use a flavoured condom if you prefer. Lip gloss and lip balm are oil based, so using them to add flavour will damage the condom.
- Brushing your teeth may cause small tears or bleeding in your gums. Don't brush your teeth before oral sex.
- If you or your partner(s) have bleeding gums, ulcers or cold sores in or around your mouth, don't have oral sex.
- If you or your partner are being treated for an STI don't have oral sex until you have completed your course of treatment.
- If you or your partner(s) carries the virus for Genital Herpes (Herpes simplex virus - HSV1 or HSV2) and have cold sores or open sores don't have oral, anal or vaginal sex. Cold sores



and/or open sores means the virus is active. It is ok to have oral, anal or vaginal sex when the virus is not active – but remember to use a condom or dental dam.

A dental dam is a square of latex which is placed over the vagina or anus during oral sex. You can also make a dental dam by cutting up a condom.

HIV

If you or your partner is HIV+ (HIV positive) oral sex is considered a safer option to reduce the risk of passing on the virus.

Anal sex

Anal sex – penis to anus, fingers/hands to anus

- Use a condom and/or latex gloves.
- Use plenty of water-based or silicone-based lubricant such as KY Gel, Wet Stuff, ID Glide). Oil-based lubricants such as Vaseline will damage the condom.
- Try to avoid contact with body fluids during sex.
- If you or your partner have any cuts, sores or bleeding in or around the anus don't have anal se.
- If you or your partner(s) carries the virus for Genital Herpes (Herpes simplex virus - HSV1 or HSV2) and have cold sores or open sores don't have oral, anal or vaginal sex. Cold sores and/or open sores means the virus is active. It is ok to have oral, anal or vaginal sex when the virus is not active – but



remember to use a condom.

- If you and/or your partner(s) are being treated for an STI, don't have anal sex until you have completed your course of treatment.

Vaginal sex

Vaginal sex – penis to vagina, fingers/hands to vagina

- Use a condom and/or latex gloves.

- Use water-based or silicone-based lubricant such as KY Gel, Wet Stuff, ID Glide) if needed. Oil-based lubricants such as Vaseline will damage the condom. Try to avoid contact with body fluids during sex.

- If you or your partner(s) carries the virus for Genital Herpes (Herpes simplex virus - HSV1 or HSV2) and have cold sores or open sores don't have oral, anal or vaginal sex. Cold sores and/or open sores means the virus is active. It is ok to have oral, anal or vaginal sex when the virus is not active – but remember to use a condom/latex glove or dental dam.

- If you and/or your partner(s) are being treated for an STI, don't have vaginal sex until you have completed your course of treatment.

Pregnancy

Unprotected vaginal sex, between a man and a woman, can result in pregnancy. Using contraception will reduce the risk of pregnancy, however the majority of contraception methods do not protect against STIs. Protect yourself – use a condom and contraception!



Use Of Sex Toys

Sharing sex toys such as vibrators or dildos can pass on STIs.

If you share sex toys always:

- cover them with a condom before you use them,
- change the condom between sharing, and
- wash the sex toy thoroughly after use.

If you and/or your partner are being treated for an STI do not use sex toys until you have completed your course of treatment.



HSE Infoline 1850 24 1850

Information on health services and entitlements

Drugs HIV Helpline 1800 459 459

Youth Health Service Cork City - 021 422 0490 / 021 422 0491

Information on health services and sexual health for young people

Rape Crisis Centres – Rape Crisis Centres provide information, support and counselling for anyone (man or woman) who has experienced sexual assault – whether recent or in the past. **www.rcni.ie**

STI & GUM Clinics

Altnagalvin Hospital, Derry City - 028 71 611 269 (048 from Rol)

Coleraine Hospital, Co. Derry - 028 703 460248 (048 from Rol)

Royal Victoria Hospital, Belfast City - 028 90 634 050 (048 from Rol)

Daisy Hill Hospital, Newry, Co. Down - 028 3083 5050 (048 from Rol)

Worried about an unexpected pregnancy?

For free, non-judgemental and trustworthy crisis pregnancy counselling text LIST to 50444 or visit <http://positiveoptions.ie>

Sexual Health Links

healthpromotion.ie: HSE Health Promotion Website

[HIV Ireland](http://HIVireland.ie): Information about HIV and sexual health services in Ireland.

spunout.ie: spunout.ie provides a wide range of health information for young people.

b4udecide.ie: information and advice to help teenagers to make healthy, responsible decisions about relationships and sex.

hpsc.ie: The Health Protection Surveillance Centre (HPSC) is Ireland's specialist agency for the surveillance of communicable diseases, including Sexually Transmitted Infections.

HSE Sexual Health Services

HSE Sexual Health Services: Information on sexual health services

Gay Men's Health Service: Information on services available for gay men.

Women's Health Project: The HSE Women's Health Project is a sexual health and support service for women working in prostitution.

LGB Services

BelongTo: BelongTo provides information and support for younger men aged 14-23.

Gay Health Network: Information on STIs, HIV testing, syphilis and safer sex. Provides information in a range of languages.

Outhouse Community Resource Centre: www.outhouse.ie



Pregnancy Links

Positive Options: The crisis pregnancy advice website crisispregnancy.ie The HSE Crisis Pregnancy Programme (formerly the Crisis Pregnancy Agency) is tasked with developing and implementing a national strategy to address the issue of crisis pregnancy in Ireland.

Sexual Health Screening

Irish Cancer Society: Information about all types of cancer including testicular and cervical cancer.

Irish Cervical Cancer Screening: The ICSP website provides information about cervical screening.

Contraception info

Think contraception: Advice and information about contraception.
General health

letsomeoneknow.ie: Mental health website for young people
Transgender organisations

Gender Identity Disorder Ireland (GIDI): Transgender Equality Network Ireland (TENI)

LGBT Support

Gay Mens Health Project -
Information and support for gay
men and men who have sex with
men
www.gaymenshealth.ie

Outhouse Community Resource
Centre
www.outhouse.ie

BeLonG To Youth Project
www.belongto.org

Southern Gay Men's Health
Project
www.gayhealthproject.com

Cork Gay Community
Development Co. Ltd.
www.gayprojectcork.com

Linc (Lesbians in Cork) Limited
www.linc.ie

Dundalk Outcomers
www.outcomers.org

Red Ribbon Project
www.redribbonproject.com

OUTWEST
www.outwestireland.ie

Johnny
www.johnny.ie

Greenbow
www.greenbowdeaf.com

Gay Lesbian Equality Network
(GLEN)
www.glen.ie



Helplines

Cara-Friend Belfast Helpline (028) 90322023
Dublin Lesbian Line (01) 8729911
Dundalk Outcomers (042) 9352915
Galway Gay Helpline (091) 566134
Galway Lesbian Line (091) 564611
Gay Information Cork (021) 4278470
Gay Switchboard Dublin (01) 8721055
Gay Switchboard Limerick (071) 9147905
Lesbian Line Belfast (028) 90238668
Lesbian Line Cork (021) 4318318
Limerick Lesbian Line (061) 310101
OUTWest (094) 9372479

HIV Help Lines

Drugs HIV Helpline - 1800 459 459
Northern Ireland HIV Helpline - 0800 137 427

www.hivireland.ie - provides a comprehensive list of HIV information and support services throughout the country.

HIV Clinical Nurse Specialists, Cork University Hospital
087 236 1249 / 087 699 6272

Download an Information Booklet on HIV.

http://www.yoursexualhealth.ie/images/uploads/Information_on_HIV.pdf

Mental Health

If you're struggling with something, it's important to talk. There is always someone there to talk to, even if you feel like no one will listen. People can tell the difference between "moaning" and really asking for help and support. You may be surprised how helpful it is just to tell someone else about it. If the person you talk to isn't helpful, keep talking till you get what you want!

Here are some of the people you might like to talk to:

- Friends are a very important source of support for many young people – they may have had similar experiences to you, and they care about how you feel.

- Family and carers Explain to them how you feel. Educate them! Slamming doors doesn't help anyone.

- Another trusted adult This means a family friend or relative – someone who you know well and are sure you can trust.

- Guidance staff/school counsellors Make sure school knows if you are having a hard time. They may make allowances if your grades aren't what they were.

- Youth advice worker/counsellor can provide advice and support.

- Social worker/police officer These people have a legal duty to



make sure you are okay. They can take action on your behalf to help you. They should also listen to what you want, and help you to feel in control.

-Doctor/GP If you are worried about your mental health or feeling very low, your doctor will be able to help by prescribing treatment or referring you to the service that is right for you. Even if you are under 16, your doctor has to take your views into account before giving treatment or talking to your parents.

For more information about this visit the site below and download the leaflet called "Consent: your rights".

www.hris.org.uk/index.aspx?o=1029

Listening

Are you a good listener? Being there for someone at the right time can be a huge help. You might even make a friend for life. Here are some tips:

- You don't always have to offer advice. Just listening is often the best policy.
- Don't rush people to confide in you. They will do it in their own time.
- Don't interrupt or give your own interpretation of what they've said.

-Take them seriously.

-Don't tell anyone else about what they say unless they ask you to, unless it's something really serious like abuse or a suicide attempt.

-Look for the warning signs that someone is finding it hard to cope. If you think someone is feeling depressed or suicidal, ask them! They may be relieved that they didn't have to say it first.

-Tell the person you're listening to if it's getting too much for you. This doesn't make you a bad person. You can suggest they speak to a helpline, support worker, teacher or other professional.

-Get support for yourself. Even professional counsellors have to talk to someone. You shouldn't have to bottle stuff up.

If things aren't going well ...

1 in 4 people experience mental ill health at some time in their lives. There are many things in life which can cause people to feel angry, upset, or depressed:

Loneliness
Family break-ups
Breaking up with boyfriend or girlfriends



Arguments with friends
Moving house
Stress at school or work
Bullying
Unemployment
Domestic abuse
Money problems
Bereavement

Some LGBT people may also experience:

Bottling feelings up inside
Trouble with “coming out”
Losing friends and family
Homophobia or transphobia
Difficulty coming to terms with sexuality or gender identity

It's not just the individual who is affected by mental illness, but family and friends too. If someone close to you is experiencing mental ill health, make sure you get support too.



Support

Scottish Association for Mental Health (SAMH)

www.samh.org.uk

Telephone - 0141 568 7000

Hours: 2 pm-4.30 pm Monday to Friday

Phone the helpline if you have a general enquiry about mental health.

Look OK...Feel Crap?

www.lookokfeelcrap.org

Look OK...Feel Crap? is a campaign run by Action on Depression (formerly known as Depression Alliance Scotland) to raise awareness of low mood and depression among young adults living in Scotland and to encourage them to seek help.

Choose Life

www.chooselife.net

The national strategy and action plan to prevent suicide in Scotland.

Samaritans

www.samaritans.org

Support for those who may be feeling suicidal.

CruseYouth Line

www.crusebereavementcare.org.uk

Telephone - 0870 167 1677 / 0808 808 1677

Hours: Mon-Fri 9am-2pm 3pm-9pm – 7 days.

National charity set up to offer free, confidential help to bereaved people. Physical Health

In our busy lives, it's easy to forget to look after ourselves. Here are some things to think about.



Physical Health

In our busy lives, it's easy to forget to look after ourselves. Here are some things to think about.

Healthy eating

Try starting the day with a hearty breakfast and see what a difference it makes. Aim for 5 portions of fruit and veg a day. More ideas below:

www.coolfoodplanet.org

Great fun websites covering just about everything about eating healthily – quizzes, facts and lots more.

www.fitness.gov/10tips.htm

Physical activity

This brings many people out in a cold sweat just thinking about it. It doesn't have to be like sports at school if you don't want it to be! Exercise has been proven to help with mild depression and anxiety. 20 minutes a day doing something that leaves you a bit out of breath could leave you looking and feeling healthier and more energised.

www.healthyliving.gov.uk

Find out about healthy eating and physical activity, and how small changes can lead to big benefits.

www.bbc.co.uk/health/healthy_living/fitness/motivation_young.shtml



Smoking

Okay, so we've all heard the warnings. Think you're ready to make a change? This website may help. www.quitbecause.org.uk
Information on why you should quit and how to do it!

Drugs and alcohol

If you use drugs and alcohol, it's important to make sure you have all the information so you can be in control. To find out more, check out the sites below. They may also be able to support you to reduce your use, or even stop altogether.

www.knowthescore.info

Information line for the general public in Scotland providing facts about drugs and their effects.

Telephone: **0800 587 5879** Hours: Seven days a week 24 hours a day

www.talktofrank.com

For information and advice on all aspects of drug misuse and referrals to local agencies. The helpline operated 24 hours round the clock.

www.aa-uk.org.uk

Al Anon Offers understanding and support for families and friends of problem drinkers whether the sufferer is still drinking or not.

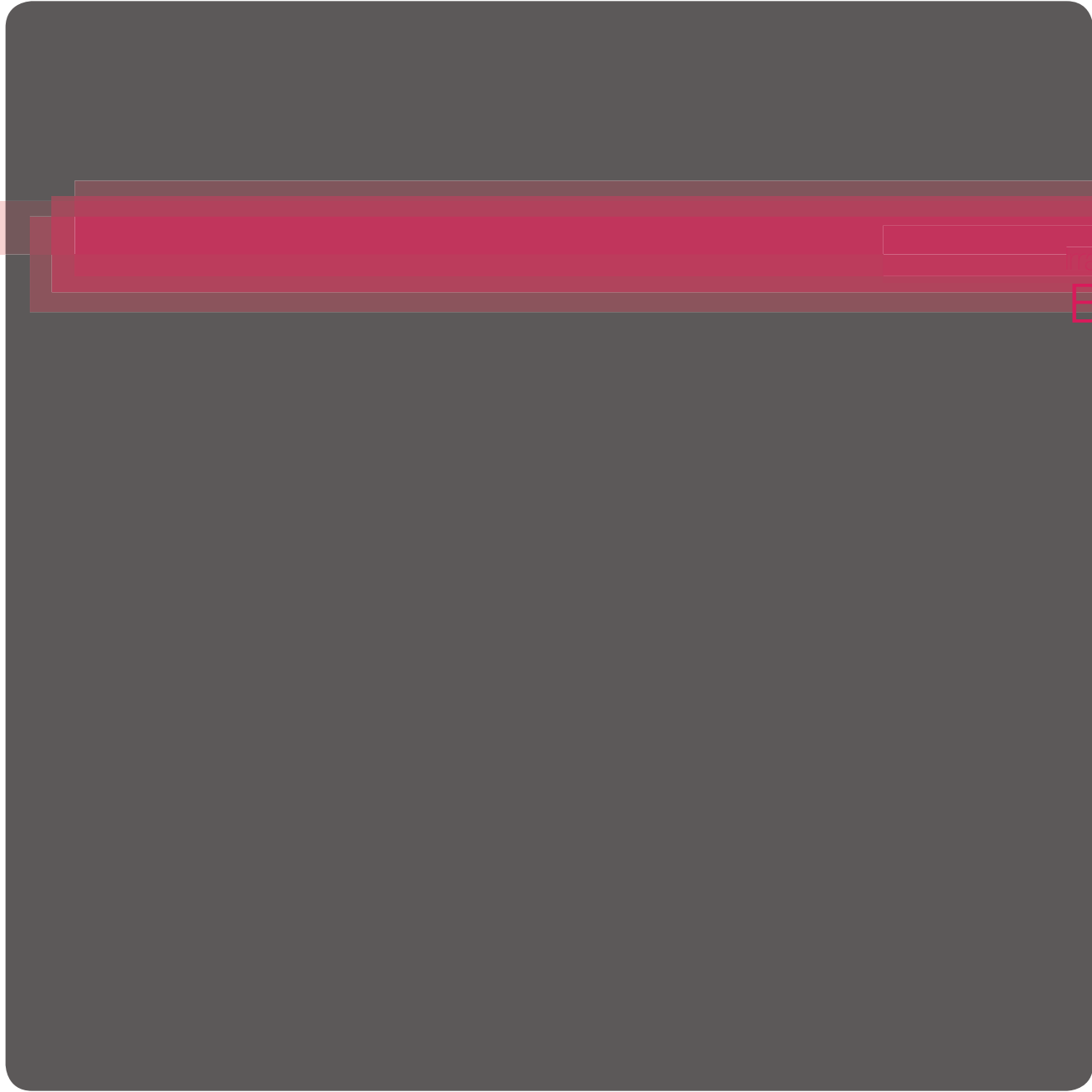
Telephone: **0141 339 8884** Hours: 24 Hours Alateen Provides help

and advice to teenagers who live with someone with a drink problem

Telephone: **0141 339 8884** Hours: 24 Hours

Drinkline Offers confidential information and advice about drinking and local contacts. Telephone: **0800 917 8282** Hours: Mon-Fri 9am-11pm






What Is Homophobia?

- Homophobia is the irrational hatred, intolerance, and fear of lesbian, gay and bisexual (LGB) people.
- These negative feelings fuel the myths, stereotypes, and discrimination that can lead to violence against LGB people.
- LGB people brought up in a homophobic society can often internalise these negative stereotypes and develop varying degrees of low self-esteem and self-hatred, often described as 'internalised homophobia'.
- The word homophobia was constructed by the heterosexual psychologist George Weinberg in the late 1960s. He used homophobia to label heterosexuals' dread of being in close quarters with homosexuals as well as homosexuals' internalised oppression. The word first appeared in print in 1969.

What Is Transphobia?

- Transphobia (by analogy with homophobia) refers to various kinds of aversions towards transsexuality and transsexual or transgendered people.
 - It often takes the form of refusal to accept a person's new gender expression.
- 

- Whether intentional or not, transphobia can have severe consequences for the targeted person; also, many transpeople experience homophobia as well, from people who associate gender identity disorder as a form of homosexuality.

- Like other forms of discrimination such as homophobia, the discriminatory or intolerant behaviour can be direct (e.g. harassment, assault, or even murder) or indirect (e.g. refusing to take steps to ensure that transgender people are treated in the same way as cisgender (non-transgender) people.)

- Direct forms of transphobia can manifest themselves in ways that are not related to violence. One example of this is the case of Tyra Hunter. Ms. Hunter was involved in an automobile accident, and when rescue workers discovered she was transgender, they backed away and stopped administering treatment. She later died in hospital. Two other well-noted transsexual victims were Brandon Teena and Gwen Araujo.



Youth Bullying in School

Many lesbian, gay, bisexual, and transgender (LGBT) youth are happy and thrive during their adolescent years. Going to a school that creates a safe and supportive learning environment for all students and having caring and accepting parents are especially important.

This helps all youth achieve good grades and maintain good mental and physical health. However, some LGBT youth are more likely than their heterosexual peers to experience difficulties in their lives and school environments, such as violence.

Experiences with Violence

Negative attitudes toward gays, lesbians, bisexuals, and transgender people put LGBT youth at increased risk for experiences with violence, compared with other students. Violence can include behaviors such as bullying, teasing, harassment, physical assault, and suicide-related behaviors.

How CDC Promotes Health Safety Among Youth – Read LGBTQ Youth Programs-At-A-Glance. A 2009 survey of more than 7,000 LGBT middle and high school students aged 13–21 years found that in the past year, because of their sexual orientation— Eight of ten students had been verbally harassed at school; Four of ten had been physically harassed at school; Six of ten felt unsafe at school; and One of five had been the victim of a physical assault at school.



Bullying and LGBT Youth

LGBT youth are also at increased risk for suicidal thoughts and behaviors, suicide attempts, and suicide. A nationally representative study of adolescents in grades 7–12 found that lesbian, gay, and bisexual youth were more than twice as likely to have attempted suicide as their heterosexual peers. More studies are needed to better understand the risks for suicide among transgender youth.

Another survey of more than 7,000 seventh- and eighth-grade students from a large Midwestern county examined the effects of school climate and homophobic bullying on lesbian, gay, bisexual, and questioning (LGBQ) youth and found that LGBQ youth were more likely than heterosexual youth to report high levels of bullying and substance use; Students who were questioning their sexual orientation reported more bullying, homophobic victimization, unexcused absences from school, drug use, feelings of depression, and suicidal behaviors than either heterosexual or LGB students; LGB students who did not experience homophobic teasing reported the lowest levels of depression and suicidal feelings of all student groups (heterosexual, LGB, and questioning students); and all students, regardless of sexual orientation, reported the lowest levels of depression, suicidal feelings, alcohol and marijuana use, and unexcused absences from school when they were in a positive school climate and Not experiencing homophobic teasing.



Effects on Education and Health

Exposure to violence can have negative effects on the education and health of LGBT youth. In a national study of middle and high school students, LGBT students (61.1%) were more likely than their non-LGBT peers to feel unsafe or uncomfortable as a result of their sexual orientation. LGBT students (over 25%) reported missing classes or days of school because of feeling unsafe in their school environment.

Overall, the stresses experienced by LGBT youth also put them at greater risk for mental health problems, substance use, and physical health problems.

What Schools Can Do?

For youth to thrive in their schools and communities, they need to feel socially, emotionally, and physically safe and supported. A positive school climate has been associated with decreased depression, suicidal feelings, substance use, and unexcused school absences among LGBT students.

School personnel, leaders of community organizations, parents, and youth have a role to play in building positive, supportive, and healthy environments for youth. Such environments promote acceptance and respect and help youth feel valued. Schools can assist by implementing clear policies, procedures, and activities designed to prevent violence. For example, a study found that, in schools with LGB support groups (such as gay-straight alliances), LGBT students were less likely to experience threats of violence, miss school because they felt unsafe, or attempt suicide than those



students in schools without LGB support groups.

To help promote health and safety among LGBTQ youth, schools can implement the following policies and practices:

- Encourage respect for all students and prohibit bullying, harassment, and violence against all students.
- Identify “safe spaces,” such as counselors’ offices, designated classrooms, or student organizations, where LGBTQ youth can receive support from administrators, teachers, or other school staff.
- Encourage student-led and student-organized school clubs that promote a safe, welcoming, and accepting school environment (e.g., gay-straight alliances, which are school clubs open to youth of all sexual orientations).
- Ensure that health curricula or educational materials include HIV, other STD, or pregnancy prevention information that is relevant to LGBTQ youth; such as, ensuring that curricula or materials use inclusive language or terminology.
- Encourage school district and school staff to develop and publicize trainings on how to create safe and supportive school environments for all students, regardless of sexual orientation or gender identity and encourage staff to attend these trainings.
- Facilitate access to community-based providers who have experience providing health services, including HIV/STD testing and counseling, to LGBTQ youth.
- Facilitate access to community-based providers who have experience in providing social and psychological services to LGBTQ youth.



What Parents Can Do?

Parents should talk openly with their children about any problems or concerns and be watchful of behaviors that might indicate their children are victims or perpetrators of bullying or violence or are depressed or suicidal. If bullying, violence, or depression is suspected, parents should take immediate action, working with school personnel and other adults in the community.

Supportive reactions can help youth cope with the challenges of being an LGBTQ teen. However, some parents react negatively to learning that they may have an LGBTQ daughter or son. In some cases,

Also, how parents respond to their LGBTQ child can have a tremendous impact on their child's current and future mental and physical health.

children are thrown out of the house or stress and conflict at home can cause some youth to

run away. As a result, LGBT youth are at greater risk for homelessness than their heterosexual peers.

Even less severe reactions can have long-lasting negative effects. Research published in the journal *Pediatrics* found significantly higher rates of mental and physical health problems among LGBT young adults who experienced high levels of rejection from their parents while they were adolescents. Compared with LGBT young adults who experienced very little or no parental rejection, LGBT young adults who experienced high levels of rejection were



- Nearly 6 times as likely to have high levels of depression;
- More than 8 times as likely to have attempted suicide;
- More than 3 times as likely to use illegal drugs; and
- More than 3 times as likely to engage in unprotected sexual behaviors that put them at increased risk for HIV and other sexually transmitted infections.

The resources provided below can help parents better understand and respond to the needs of LGBTQ adolescents.



Not Sure Whether Your Report Is Important Enough To Make?

'All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood' Article 1, Universal Declaration of Human Rights

'All are equal before the law and are entitled without any discrimination to equal protection of the law. All are entitled to equal protection against any discrimination in violation of this Declaration and against any incitement to such discrimination' Article 7, Universal Declaration of Human Rights

the weak and those that we don't understand.

Anyone who is openly lesbian, gay, bisexual or transgender (LGBT) will experience discrimination, whether direct or indirect, institutionalised or in personal forms, from those we do not know or from those people who we would otherwise expect support from. Homosexuality has been described as the last acceptable prejudice.

Human rights are enshrined in international law and in the laws of this country. As a human being you have a right to protection

These fundamental rights and freedoms were agreed with many others at the United Nations more than fifty years ago. The intent was to provide equal rights to every human being. Today, in our communities, in our homes, in our schools, in our workplaces and in our relations with the state, many people, even in this progressive country, do not enjoy these rights and freedoms. Things have improved in the past 50 years, but we are far from being an equal society.

Individual difference often leads to a lack of understanding, mistrust and intolerance. In some cases it can lead to hatred and in many cases it results in acts of discrimination. Human beings are diverse however throughout history the strong have oppressed



against discrimination in all its forms; whether it is a physical attack, verbal abuse, damage to property or exclusion from any of your fundamental human rights.

By not making a report you oppress and discriminate against yourself and all those people who experience discrimination and oppression and nothing changes. By making a report, you are adding your voice to the growing numbers of LGBT people who are standing up for their rights, who are speaking out against oppression and discrimination in all its forms. You are adding a drop of water to a tide of change. Even if you don't want us to take any action, your report is still important. It is important to us and important to all those people who have experienced the harmful effects of prejudice in the past and those who will experience it in the future.

Please make your report today. See Page **



The Police Service of Northern Ireland has appointed a HIMLO (Hate Incident Minority Liaison Officer) or MLO (Minority Liaison Officer), as it may also be known, in every police district. These officers have been specially trained to support victims of homophobic incidents.

The HIMLO has an additional responsibility to engage with individuals and groups who work to support and assist victims of homophobic incidents.

What is a Homophobic/Transphobic Incident?

The Police Service of Northern Ireland define a homophobic/transphobic incident as:

Any incident which is perceived to be homophobic/ transphobic by the victim or another person.

Homophobic/ transphobic incidents may take many different forms, for example:

Assaults, damage to your home or other property, verbal abuse or hate mail.

The police recognise the impact that even minor homophobic/transphobic incidents have on the victim and wider community. We will, therefore, respond to all incidents reported to us, whether or not they amount to a crime. If you are the victim of a homophobic/transphobic incident the police will investigate it in a professional and sensitive manner. This chapter tells you what to do, and who can help.



What should you do if you have been the victim of a Homophobic/transphobic Incident?

If you have been abused, threatened or assaulted in any way, contact the police in the normal manner and an officer will be appointed to investigate the case. You may wish to ask to speak to the HIMLO.

If you feel under immediate threat
Call 999

If you do not require an immediate police response you should contact the police on the non-emergency number **0845 600 8000** and ask for the police station of the area where the incident occurred. An officer from that area will be appointed to investigate the incident.

The police recognise that some people, for whatever reason, may be reluctant to report this type of incident to them. If the police are to prevent homophobic/transphobic incidents and make those responsible accountable to the law, incidents must be reported. Even if you do not wish the police to investigate the incident, it is important to report it for information to have the incident recorded.

If applicable, the police can arrange for an interpreter to assist you. If you do not wish to contact the police directly, you may do so through a third party or report online via the PSNI website or any one of the organisations listed on page**.



What will the Police do?

The Police Service of Northern Ireland has a clear policy in respect of the investigation of these incidents.

If you report at a police station, a room will be made available where you can discuss the matter in private. A Police Officer will be appointed to carry out an investigation and you will be updated on the progress of the investigation in accordance with the instruction of the Chief Constable. You should note the Police Officer's name and station, date and incident number for further reference.

The local HIMLO will be informed and unless you indicate otherwise, this Officer will contact you to offer advice and support.

The police will deal with your complaint in a professional, confidential and sensitive manner.

Hate Incident Minority Liaison Officer (HIMLO)

If you report a homophobic/transphobic incident the HIMLO will contact you, (unless you indicate that you do not want them to) and provide information about the incident and any developments in the investigation. They will also provide information on crime prevention, police powers and procedures and appropriate support groups

The HIMLO can be spoken to in confidence, offer a sympathetic service and respond appropriately to the individual needs of the victim. Information including contact details for Hate Incident Minority Liaison Officers in your district and confidential **online reporting at www.psni.police.uk**



If you have been the victim of a transphobic incident contact the police, and some of the organisations listed who may be able to help you.

Transphobic Helplines

Police

0845 600 8000 (ask for local police)
www.psnl.police.uk

Community Relations Council

028 90 2275000
www.nicrc.org.uk

Belfast Butterfly Club

028 92673720 (Wednesday 8-10pm)
www.belfastbutterflyclub.co.uk

Samaritans

0845 790 9090
www.samaritans.org.uk

Victim Support

028 90 244 039
www.victimsupport.org.uk

Equality Commission for Northern Ireland

028 90 500 600
www.equalityni.org

Northern Ireland Human Rights Commission

028 90 243987
www.nihrc.org



Homophobic Helplines

Northern Ireland Gay

Rights Association

028 90 665257 /

028 90 664111

Samaritans

0845 790 9090

www.samaritans.org.uk

Cara-Friend/GLYNI (Men Women Youth)

028 90 890202

www.Cara-Friend.org.uk

Victim Support

028 90 244 039

www.victimsupport.org.uk

Rainbow Project

028 90 319030 (Belfast) or

028 71 283030 (Foyle)

www.rainbow-project.org

Equality Commission for Northern Ireland

028 90 500 600

www.equalityni.org

Lesbian Advocacy Services Initiative

028 90 249452

www.lasionline.org

Northern Ireland Human Rights Commission

028 90 243987

www.nihrc.org

Lesbian Line

028 90 238668

www.lesbianlinebelfast.org.uk

Crimestoppers

0800 555 111

www.crimestoppers-uk.org



What Do I Do If A Young Person Comes Out To Me?

Every instance of this is likely to be different but there are a few key points to remember:

- Openness and non-judgmental responses.
- Ensuring that you don't panic – in the majority of cases young people will simply want someone to tell.
- Honesty about what you do and do not know – if there are questions that you can't answer then promise to get back to the young person with the answer later.
- Remembering that you could be the first person ever to be told about this and having a young person confide in you is a huge privilege.
- Reinforcing the idea that being LGBT is completely normal and nothing to be ashamed of.
- Reassuring them of confidentiality and that you do not need to share information with anyone else unless you believe that they are at risk of harm.
- Readiness to provide relevant and up-to-date information and resources.

Exploring the young person's disclosure with open questions can help them open up and also allow you to find out what they need from you.



What is Coming Out LGBT?

Coming out is when someone tells someone else their sexual orientation. Most of us are brought up to think that everyone is attracted to the opposite sex. For people who this is the case, they very rarely need to come out, as who they are attracted to matches what is seen as normal. These people may not even consider themselves to have a sexual orientation because it's not labelled as different.

Lesbian, gay and bisexual people, however, have to make the choice to either publicly hide how they feel or tell people they are attracted to people of the same gender or both genders. Lesbian, gay and bisexual people come out at all stages of their life and to varying degrees. For some it will be essential for them to live fully as themselves, whereas for others it might be that they only come out to themselves.

The following sections in this guide will look at all the different stages of the coming out process in more detail. Just remember that coming out is your choice and you should never feel forced to tell people if you don't feel ready. Coming out can be a lifelong process and only you can know when, where and who to tell.

Coming Out to Friends

Many lesbian, gay and bisexual people come out because they reach a point where they don't want to hide who they are anymore. Telling friends can provide extra support and can make relationships feel more honest and real. Some friends may not accept it, but real friends will accept you for who you are. Before coming out to a friend, have a think about the following:

- Decide who you want to tell
- Decide who you can trust not to tell others (unless you want them to).
- It is important when telling a friend to explain that it is your choice to tell others in your own time.
- Be prepared for questions and to explain how you feel.
- Make sure you are in a safe, neutral space.
- Be confident about your decision and don't let others try and talk you out of it.
- Remind them that who you are attracted to is only one part of you and that you are still the same person.
- Explain that your friendship doesn't necessarily have to change.

Coming out may change some friendships, sometimes you might end up being closer, but sometimes people might become awkward around you. The important thing is to explain you are still the same person. If they don't accept it be patient and give them some space, as they may need time to get used to it.



Coming Out to Family

Telling family members can feel especially daunting because they have known you your whole life. The news may come as a surprise and they may think that they are somehow to blame. It's important to help them understand that this is a part of you that no-one can change.

- Think about what family member to tell first; who you think might be most supportive.
- Some parents or carers, may blame themselves, or think that they did something wrong. Try and reassure them that this is a part of you that no-one can change, and that it has nothing to do with them getting it wrong.
- If they are worried about you not having children, explain there are many options if you want to be a parent.
- Be ready to have a conversation about it with them and be ready to answer questions.
- Remember that the first reactions you get from family members may not be a true representation of how they'll feel in the long term.
- Many parents, with time, can become your biggest advocate.



Coming Out at School

Some lesbian, gay and bisexual people will go through school without telling anyone their sexual orientation, but some may decide to come out at school. For others being outed or being presumed to be lesbian, gay or bisexual will also be a reality.

Some things to consider are:

- Speaking to your guidance teacher or the head teacher to discuss how the school will support you.
- Ask for a copy of the school's anti-bullying policy to see if it mentions homophobia.
- Get further advice from LGBT youth groups or online resources.
- If your friends will support you to come out at school.

The United Nations Convention on the Rights of the Child states that every person under the age of 18 should have the right to education, the right to be kept safe from harm, and the right to have a say in the decisions affecting their own life. It is your school's responsibility to make sure that you are safe from bullying and discrimination, but if your school are failing to support you properly, you may want to report it to the police.



Coming Out at College/Uni

A lot of lesbian, gay and bisexual people see going to college or university as an opportunity to live more openly and be more public about their sexual orientation. Of course people's experiences vary greatly depending upon where they study, what subjects they pick and their classmates.

Before enrolling for a course at a college or university, it might be useful to consider the following:

- Check if they have an LGBT society.
- Read the college/university's mission statement to see if it mentions equality and diversity.
- Ask for a copy of the college/university's anti-bullying policy.

All colleges and universities are required by law to deal with any discrimination you face as a lesbian, gay or bisexual student, but for them to deal with it you must report it. This is not always easy to do, so perhaps ask a friend to come with you for support.





Support & Advice

Once you have come out to yourself, you might want to tell people close to you straight away, but for many people this takes time. Before telling friends and family there are a number of ways you can get support to make this easier. Below are a few ideas.

1. Websites

There are now a number of websites for LGBT people that offer information and advice. See Page **

2. Online Forums

If you don't feel ready to talk to other people face to face, there are a number of online forums where you can talk to other lesbian, gay and bisexual people. This can be a safe and anonymous way to find out more and discuss how you are feeling. See Page**

3. Support Groups

There are a number of youth groups where you can meet other lesbian, gay, bisexual and transgender young people in a safe and confidential environment. For a list of LGBT youth groups in see: Page **

Things to Think About

Coming out to others can be a hugely liberating experience and many people say it feels like a huge weight has been lifted from them. Below is a list of some of these benefits as well as some things to consider.



Benefits

- Being yourself
- Unloading the burden
- Living as you want to live
- Meeting other lesbian, gay and bisexual people
- Helping/supporting other lesbian, gay and bisexual people
- Gradually feeling at ease with yourself
- Educating others/breaking down stereotypes/myths
- Being a positive role model for others

Considerations

- Homophobia
- Safety
- Negative reactions
- Being rejected
- People not taking it seriously
- Some people might treat you differently
- People not listening/understanding (ignorance)
- People trying to talk you out of it

Coming out rarely is all good or all bad, but if you do have a negative experience, remember that by coming out you will have increased opportunities to meet other LGBT people, make new friends, and receive support from others.



Coming Out Step by Step

Telling someone that you are close to can be the hardest part of coming out, so it's important to be prepared. There's never really a proper time or place and you'll probably never feel 100% ready, but this step by step guide will help you to have all bases covered.

Be sure you are ready to tell:

- Be confident in yourself.
- Be sure that you want to come out rather than feeling you have to.

Be informed yourself – be prepared to answer questions:

- Educate yourself on the topic so you can educate others.
- If you are well informed you're more likely to be taken seriously.

Get support

- See the Support & Advice section, page **.

Think about who, where, when:

- Be sure about whom you want to tell and that they are someone you trust.
- Do it somewhere neutral and safe (somewhere neither of you know others).
- Make sure there is plenty of time to talk.

Decide how you are going to word it:

- Don't be too scripted or formal.
- Don't provide too much information at once.
- Try and be calm.
- Be non-confrontational.

Be ready for reactions:

- Be prepared for any reaction.
- Remember that this might be the first time they have thought of you this way/met an out lesbian, gay or bisexual person.
- Their first reaction might not be how they actually feel.
- Give people a chance to think and time to get used to it.

Remember that it probably took time for you to come to terms with it.





Artists Friends Quiet Camp
Lesbian Gay
Bisexual Transgendered
Family
Comics

2.0

coming out trends

What is Coming Out Transgender?


Coming Out is when someone tells someone else their gender identity or sexual orientation. Most of us are brought up to think that everyone's gender identity matches their physical body and that everyone is attracted to the opposite sex. For people who this is the case, they very rarely need to come out, as who they are and who they are attracted to matches what is seen as normal. These people may not even consider themselves to have a gender identity or sexual orientation because it's not labelled as different.

Trans people, however, have to make the choice to either publicly 'hide' how they feel or tell people their true gender identity. Trans people come out at all stages of their life and to varying degrees. For some it will be essential for them to live fully as themselves, whereas for others it might be that they only come out to themselves.

The following sections in this guide will look at all the different stages of the coming out process in more detail. Just remember that coming out is your choice and you should never feel forced to tell people if you don't feel ready. Coming out can be a lifelong process and only you can know when, where and who to tell.

Coming Out to Yourself

Before you can come out to anyone else, it's important to come out to yourself. This is when you acknowledge your own gender identity and decide how you want to express it. Coming out to yourself gives you the opportunity to explore exactly who you want to be. It



might be useful to do some research into different transgender identities, but what's important at this stage is being honest with yourself and taking time to discover how you really feel.

Becoming or expressing who you really want to be might seem impossible or hugely daunting at this stage, but that doesn't mean you won't get there. Many trans people have felt like this, but with the right information, advice and support they have achieved what they once thought they would never be able to do. When coming out to yourself the following suggestions might be useful:

1. How do you want to express your gender identity?

Look over all the categories within the trans umbrella and think about which one seems the closest to how you feel. Think about what is involved in achieving this and how you feel about the process.

2. Experiment with the idea.

Some people dress up or experiment with different personas while in a private, safe space to see what feels right. This could involve changing your voice, how you walk, or putting on different clothes.

Support & Advice

Once you have come out to yourself, you might want to tell people close to you straight away, but for many people this takes time. Before telling friends and family there are a number of ways you can get support to make this easier. Below are a few ideas. For further advice see Useful Links.





1. Speak to your GP

They can put you in touch with a Gender Specialist who will be able to discuss your options in more detail.

2. Websites

There are now a number of websites for trans people that offer information and advice (see page **).

3. Online Forums

If you don't feel ready to talk to other people face to face, there are a number of online forums where you can talk to other trans people. This can be a safe and anonymous way to find out more and discuss how you are feeling.

4. Support Groups

There are a number of trans support groups where you can meet other trans people in a safe and confidential environment.

Things to Think About

Coming out to others can be a hugely liberating experience and many people say it feels like a huge weight has been lifted from them. Below is a list of some of these benefits as well as some things to consider.

Benefits:

- Being more true to yourself.
- Unloading the burden.
- Living as you want to live.
- Meeting other like minded people.
- Helping/supporting other trans people.



- Gradually feeling at ease with yourself.
- Educating others/breaking down stereotypes/myths.
- Being a positive role model for others.

Considerations:

- Transphobia.
- Safety.
- Negative Reactions.
- Being rejected/ostracised.
- People not listening/understanding (ignorance).
- People trying to talk you out of it/change your mind (scaremongering).
- It is a lengthy process (be patient).
- Be realistic about what you will achieve through HRT and surgery.
- It's a life changing decision.

Coming out rarely is all good or all bad, but if you do have a negative experience, remember that by coming out you will have increased opportunities to meet other trans people, make new friends, and receive support from others.

Coming Out Step by Step

Telling someone that you are close to can be the hardest part of coming out, so it's important to be prepared. This step by step guide will help you to have all bases covered.





Be sure you are ready to tell:

- Be confident in yourself.
- Be sure that you want to come out rather than feeling you have to.

Be informed yourself – be prepared to answer questions:

- Educate yourself on the topic so you can educate others.
- If you are well informed you're more likely to be taken seriously.

Get support

- See the Support & Advice section, page **.

Think about who, where, when:

- Be sure about who you want to tell and that they are someone you trust.
- Do it somewhere neutral and safe, somewhere neither of you know others.
- Make sure there is plenty of time to talk.

Decide how you are going to word it:

- Don't be too scripted or formal.
- Don't provide too much information at once.
- Try and be calm.
- Be non-confrontational.

Be ready for reactions:

- Be prepared for any reaction.
- Remember that this might be the first time they have thought of you this way/met any trans person.



Their first reaction might not be how they actually feel:

- Give people a chance to think and time to get used to it.

Remember that it probably took time for you to come to terms with it.

Transgendered Coming Out to Friends

Many trans people come out because they reach a point where they don't want to hide who they are anymore. Telling friends can provide extra support and can make relationships feel more honest and real. Some friends may not accept it, but real friends will accept you for who you are.

Before coming out to a friend, have a think about the following:

- Decide who you want to tell.
- Decide who you can trust not to tell others, unless you want them to.
- It is important when telling a friend to explain that it is your choice to tell others in your own time.
- Be prepared for questions and to explain your decision.
- Make sure you are in a safe, neutral space.
- Be confident about your decision and don't let others try and talk you out of it.
- Remind them that your gender is only one part of you and that you are still the same person.
- Explain that your friendship doesn't necessarily have to change.



Transgendered Coming Out to Family

Telling family members can feel especially daunting because they have known you as the gender you were assigned at birth for longer than most- maybe your whole life. The news may come as a complete shock and they may think that they are somehow to blame.

It's important to help them understand that this is a part of you that no-one can change, and that by transitioning (in whatever form), you will become the person you really want to be.

- Remember that this might be the first time they have thought of you this way.
- A lot of parents may think that they have done something wrong and blame themselves.
- Some parents may feel like they have 'lost' a son or daughter and will need time to accept your new gender.
- Remember that the first reactions you get from family members may not be a true representation of how they'll feel in the long term.
- Many parents, with time, can become your biggest advocate, actively supporting you through your transition.

" When Simon told me he was changing his gender, I was a little taken aback, but I listened to what he had to say and was happy that he had found contentment in himself"

Grandparent of a trans man

" At first I was upset and felt that my son had died and in a way was grieving, and then eventually, I watched my daughter grow into a confident and beautiful young woman. I love my daughter and wouldn't have her any other way"

Mother of a trans woman

Coming Out to Partners

All relationships can be challenging for a number of reasons, regardless of your gender identity or sexuality. The fear that telling a new or existing partner that you have identified or do identify as transgender, or would like to transition will end a relationship often



makes trans people reluctant to come out to their partner.

Although some partners may not be able to continue a relationship with someone who changes their gender, many relationships will continue through a transition. Your partner will probably need time to think about how they feel, so try and be patient.

If you have already transitioned and meet someone new it's important to think about what stage in the relationship would be a good time to tell them, if that is what you want to do. It's also important to consider if you don't tell them and they find out later on, how they might feel.

It's important to remember that even if an existing relationship doesn't work out, this doesn't mean you won't meet someone else. Trans people, like everyone else, can have long, happy relationships.

Coming Out at School

Some trans young people may want to start transitioning when they are still at school. This decision should be thought about carefully, as it could have a huge impact on your experience at school.

Some things to consider are:

- Speaking to your guidance teacher or the head teacher to discuss how the school will support you.
- Ask for a copy of the school's anti-bullying policy to see if it mentions transphobia.
- Get further advice from transgender support groups or online resources.

“ I have never identified as a trans woman and have only ever seen myself as a woman. I began transitioning when I was seventeen and have lived successfully up until now as a woman. I have been on hormones for nearly eight years and undergone breast surgery. I have no plans to undergo the full operation as I don't want to risk complications, and generally feel happy as I am now. I have a very supportive partner and family”.

27 year old woman



The United Nations Convention on the Rights of the Child states that every person under the age of 18 should have the right to education, the right to be kept safe from harm, and the right to have a say in the decisions affecting one's own life. It is your school's responsibility to make sure that you are safe from bullying and discrimination, but if your school are failing to support you properly, you may want to report it to the police.

A useful guide for schools to support transgender students has been produced by GIRES and can be downloaded from: www.gires.org.uk/assets/Schools/TransphobicBullying.pdf

Coming Out at College/Uni

Transgender people's experiences of studying at college or university can vary widely and although anti-discrimination legislation exists, sadly not all colleges and universities are proactive in implementing it. Before enrolling for a course at a college or university, it might be useful to consider the following:

- Check if they have an LGBT society.
- Read the college/university's mission statement to see if it mentions equality and diversity.
- Ask for a copy of the college/university's anti-bullying policy.
- Contact the college by phone or email to state your interest in enrolling on a course and ask them if they have experience of working with trans students.

All colleges and universities are required by law to deal



with any discrimination you face as a trans student, but for them to deal with it you must report it. This is not always easy to do, so perhaps ask a friend to come with you for support.

Guidance for colleges and universities to support trans students has been developed by the Forum on Sexual Orientation and Gender Identity in Post-School Education and can be downloaded at: www.scottishtrans.org/uploads/resources/a7002.pdf.

Coming Out at Work

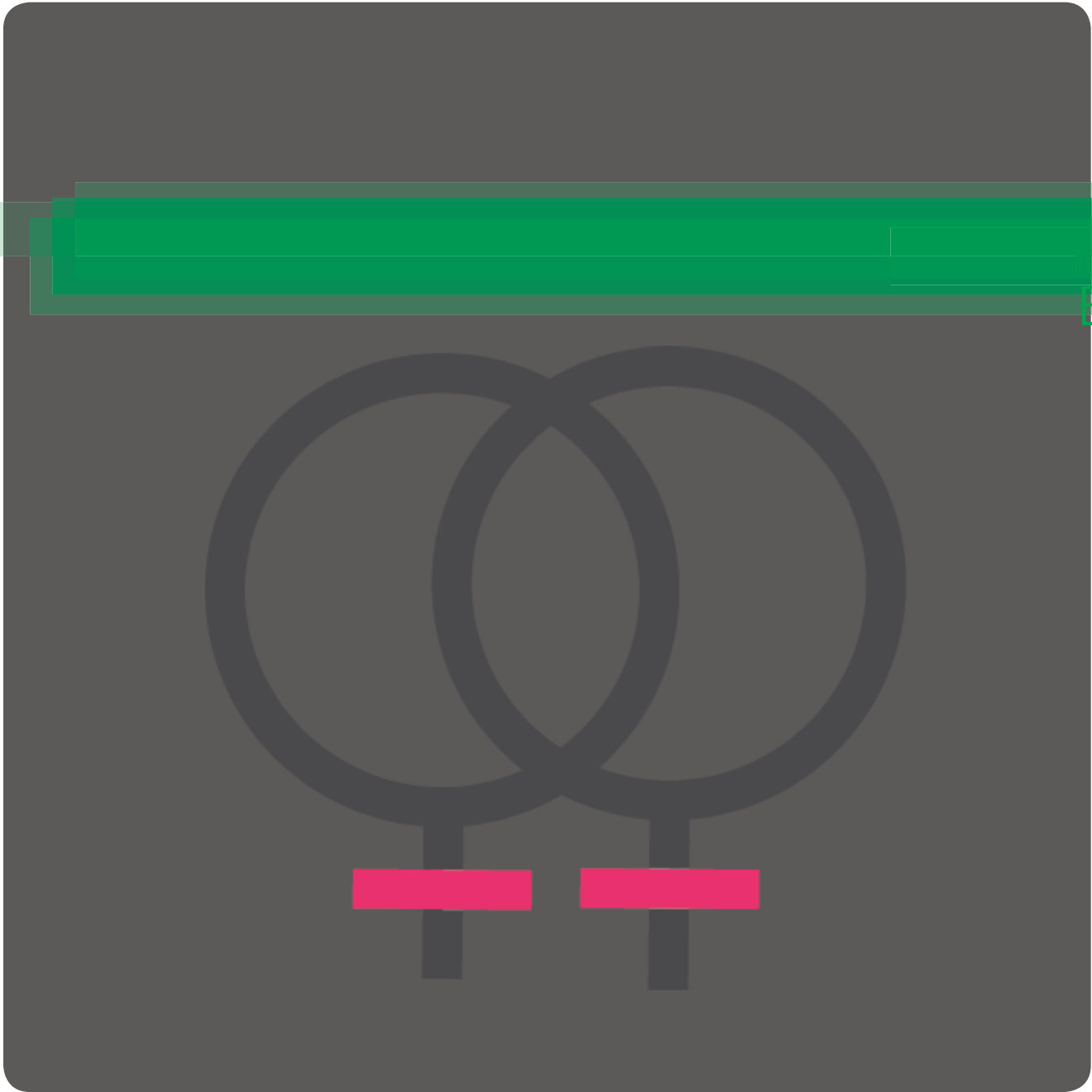
Most trans people are not out at work despite legislation protecting transsexual people from employment discrimination being in place since 1999.

It is also still common for transsexual people to change job at the time of transition to avoid being outed at work. Other transgender people often go to significant lengths in order to reduce the chance of their colleagues and employers finding out they are transgender.

Some people do transition and remain in the same job and are supported by their work, but it is worth taking time to consider this decision. For more information see Rights & Legislation.

A useful guide for employers on supporting transgender employees has been produced by the Scottish Transgender Alliance and Stonewall Scotland, and can be downloaded at: www.scottishtrans.org/uploads/resources/changing_for_the_better.pdf





A
Friends
Lesbian
Gay
Transgendered
Bisexual
Family
Comical

8.0

Lesbian

What Does Lesbian Mean?

The word lesbian describes a girl or woman who is attracted, both sexually and emotionally to other girls or women.

It is normal to question your sexuality and part of growing up is discovering and learning about yourself. It is also normal to have feelings towards other women and to be attracted to other women.

Am I Old Enough To Know?

Everyone is different and there is no right or wrong age to realise you are a lesbian. Sexuality can be fluid and you may be attracted to different people at different times in your life.

Young people are often told that they don't know themselves well enough or should wait until they are older before they decide. Many young women say they have known for a long time that they feel 'different' to other women and they are aware of their attraction to other women at a young age. It's okay to feel like this and it is okay to change your mind. Sexuality does not need to be fixed forever – for some people it will be, and for others it might shift over time.



What Does Lesbian's Look Like?

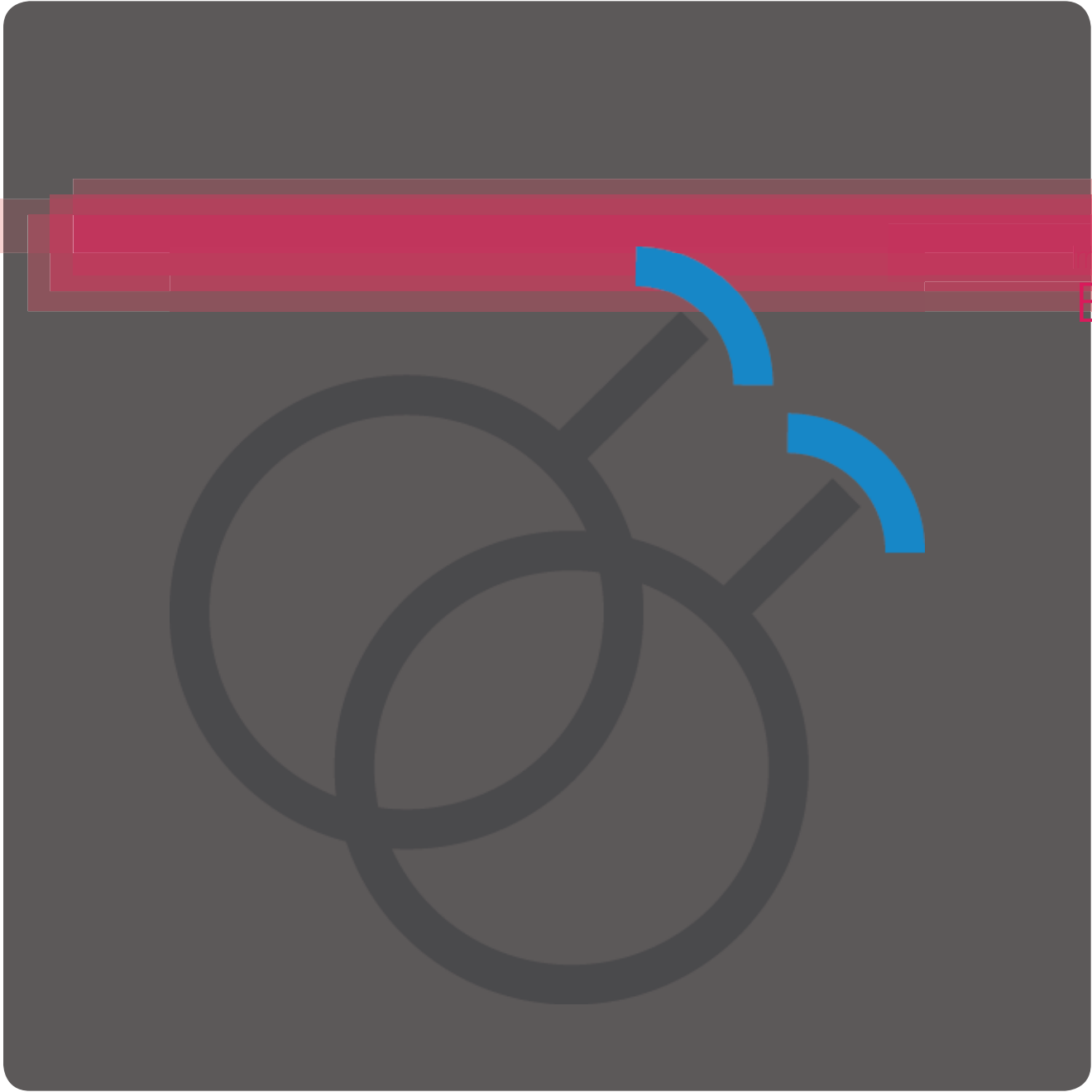
Myths and stereotypes about lesbians can lead people to believe that all women who identify as lesbian must look and act masculine (often referred to as butch). Lesbians are as varied and different as straight people, some may be butch but others may be very feminine. Being a lesbian is not a way of life, it is a part of life.

Straight people are not defined just by who they are attracted to, so there is no reason why you should be. Stereotypes don't really define any individual; we are much too diverse for that! You can be exactly the person you want to be and should never feel pressure to act or look a certain way.

Is It Normal?

There are still some messages out there that make us believe that it is not okay or normal for a girl or woman to fancy another girl or woman. Some societies and communities do not accept this difference. It is completely normal to have feelings for other girls or women and we can offer support and advice to help you feel more comfortable about who you are.





A
Friends
Lesbian
Gay
Transgendered
Bisexual
Family
Sarcastic
Comical
Creative
Caring
Quiet
Strong
Childish
Talkative
Playful
Caring
Creative
Sarcastic
Comical
Family
Friends
Lesbian
Gay
Transgendered
Bisexual

9.0



What Does Gay Mean?

The word gay is often used to describe a guy who is attracted, both sexually and emotionally to other guys. It can also be used to describe lesbian women, however in this section we will use the word gay to talk about guys.

It is normal to question your sexuality and part of growing up is discovering and learning about yourself. It is also normal to have feelings towards other boys or men and to be attracted to other boys or men.

Am I Old Enough To Know?

Everyone is different and there is no right or wrong age to realise you are gay. Sexuality can be fluid and you may be attracted to different people at different times in your life.

Young people are often told that they don't know themselves well enough or should wait until they are older before they decide. Many young men say they have known for a long time that they feel 'different' to other boys or men and they are aware of their attraction to other boys or men at a young age. It's okay to feel like this and it is okay to change your mind. Sexuality does not need to be fixed forever – for some people it will be, and for others it might shift over time.



What Do Gay Men Look Like?

Myths and stereotypes about gay men can lead people to believe that all men who identify as gay must look and act feminine (often referred to as camp). Gay men are as varied and different as straight people, some may be camp but others may be very masculine or butch.

Being a gay man is not a way of life, it is a part of life.

Straight people are not defined just by who they are attracted to, so there is no reason why you should be. Stereotypes don't really define any individual; we are much too diverse for that! You can be exactly the person you want to be and should never feel pressure to act or look a certain way.

Is It Normal?

There are still some messages out there that make us believe that it is not okay or normal for a guy to fancy another guy. Some societies and communities do not accept this difference. It is completely normal to have feelings for other guys and we can offer support and advice to help you feel more comfortable about who you are.





Artistic Friends Quiet Strong Caring Creative
Lesbian Gay Transgendered
Bisexual Family Sarcastic Comical
Childish Alternative

10.0

bisexual

What Does Bisexual Mean?

The word bisexual describes a person who is attracted to both men and women.

It is normal to question your sexuality and part of growing up is discovering and learning about yourself. It is also normal to have feelings towards other people, both men and women.

Am I Old Enough To Know?

Everyone is different and there is no right or wrong age to realise you are bisexual. Sexuality can be fluid and you may be attracted to different people at different times in your life.

Young people are often told that they don't know themselves well enough or should wait until they are older before they decide. Many young men say they have known for a long time that they feel 'different' to others and they are aware of their attraction to both men and women at a young age. It's okay to feel like this and it is okay to change your mind. Sexuality does not need to be fixed forever – for some people it will be, and for others it might shift over time.



What Do Bisexual People Look Like?

There is often a myth that bisexual people are either lesbian or gay men who have not yet decided. This is untrue and bisexual people have the right to be attracted to both men and women without needing to choose one. Straight people are not defined just by who they are attracted to, so there is no reason why you should be.

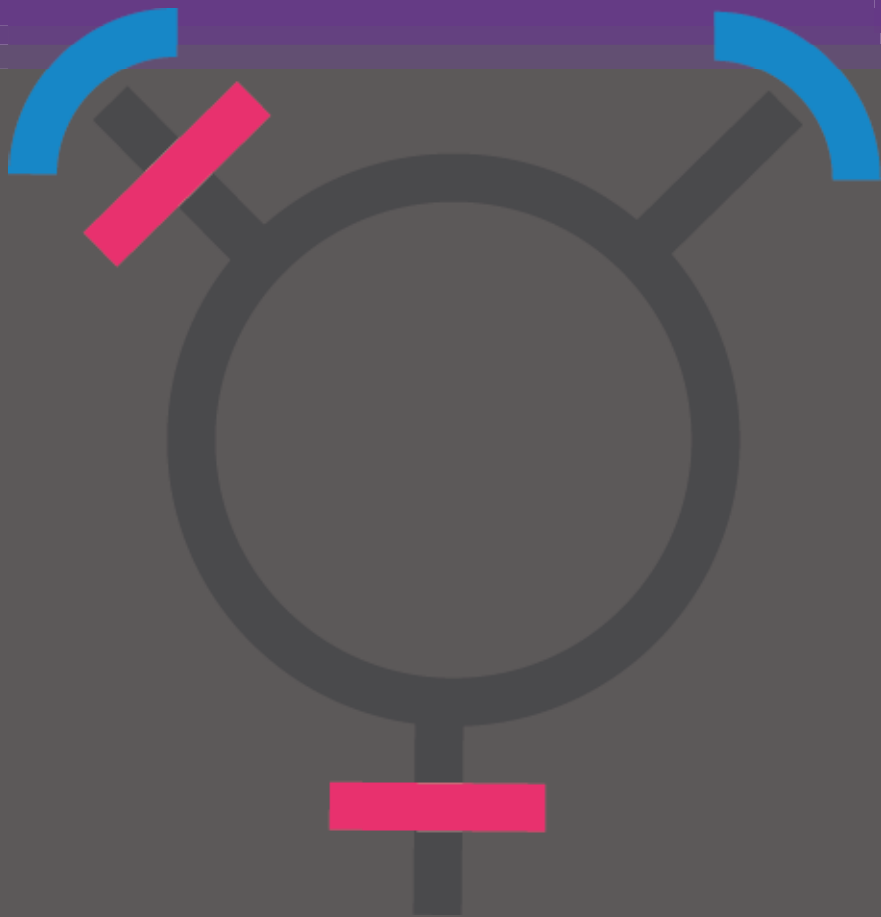
Stereotypes don't really define any individual; we are much too diverse for that! You can be exactly the person you want to be and should never feel pressure to act or look a certain way.

Is It Normal?

There are still some messages out there that make us believe that it is not okay or normal to be attracted to both men and women.

Some societies and communities do not accept this difference. It is completely normal to have feelings for both men and women and we can offer support and advice to help you feel more comfortable about who you are.





Friends
Lesbian
Gay
Transgendered
Family
Bisexual

11.0

Transgendered

Transgendered?

Some of the things that you might experience as a transgender person are similar to those that people coming to terms with being LGB may face, including:

- Feelings of shame and fear and internalised homophobia and transphobia.
- Fear of disclosure and coming out to people.
- You may experience social pressures to conform.
- You may be worried about relationships, either losing current relationships or about future relationships.

Possible Issues For Transsexuals.

- Legal issues like re-registering sex e.g. on your birth certificate.
- Medical issues like hormone therapy and gender-reassignment surgery.
- Social issues like coming out to family, friends and partners, transitioning and “passing”.
- Transphobia: the unrealistic or irrational fear and hatred of transgender people.

This includes verbal or physical violence, discrimination, harassment, or refusing to call someone by their preferred pro-noun e.g. he or she. Like homophobia, transphobia is based on stereotyping and misconceptions. Sadly, anyone outside society’s view of the “norm” could be a target, regardless of sexual or gender identity.



Why LGB and T

Transgender is an umbrella term that we use to describe someone who does not conform to society's view of being male or female.

Most people understand that gender identity (see below for a definition) and sexual orientation (who you are attracted to) are separate parts of what makes up a person. Why do LGBT organisations work with both?

- Many transgender people are lesbian, gay or bisexual
- Many lesbian, gay or bisexual people are transgender

Lesbian, gay and bisexual people frequently challenge gender boundaries in their social and often sexual behaviour and are often victims of hate crimes because of their gender presentation. Transgender people have always been present in the LGB community. Drag, butch-femme culture and androgyny are all features of transgender influence.

Transgender people have played important roles in campaigning for LGBT rights over many years.

Definitions

Sex: refers to someone's biological identity as a male or female – characterised by having male or female genitalia.

Gender: features of maleness or femaleness expressed through personal characteristics – society plays a large part in defining “acceptable” male and female roles, though many of us feel that we don't fit fully into either of these definitions.



A personal feeling of maleness, femaleness, or being somewhere in between is known as Gender Identity.

Transgender: an umbrella term that we use to describe someone who does not conform to society's view of being male or female. It includes a variety of gender identities and expressions, some of which are explained below.

Transsexual: a medical term used to describe people whose gender and biological sex are different, for example someone whose biological sex is female, but they identify as male gender. Transsexual people often seek medical treatment to align their biological sex with their true gender.

- MTF: male to female transsexual person.
- FTM: female to male transsexual person.

Intersex: people born with chromosomal abnormalities or ambiguous genitalia (for example they may have an external penis, but internal female reproductive organs such as ovaries). At birth, doctors and parents often decide whether the infant should be male or female and then they get surgery to assign them this gender. They may develop issues with their gender identity as they grow up.

Other transgender identities include:

- Drag queens.
- Drag kings.
- Gender benders and gender blenders.
- Cross-dresser.
- Androgyny – having both masculine and feminine



characteristics, or also describes being neither male nor female.

- Anyone else who identifies as transgender.

Most of this information has been sourced from the Beyond Barriers Transgender leaflet. Another great resource is the Gender Identity information booklet which has more details about medical transition options, gender recognition and information for friends and family of transgender people.

Gender Recognition

Transsexuals can now get a birth certificate showing their true gender. The Gender Recognition Act 2004 allows transsexual people to apply for a Gender Recognition Certificate. The GR certificate enables you to have a new birth certificate issued showing your true gender (also referred to as 'acquired gender') rather than your gender as assigned at birth.

For you to be eligible to apply you must:

- Intend to live in your true gender permanently.
- Be 18 years old or over.
- Have been diagnosed as gender dysphoric by a gender specialist, though there is no requirement for you to have undergone gender confirmation surgery (also referred to as 'gender reassignment surgery').
- Have permanently lived in your true gender for at least two years (this period is also referred to as 'Real Life Experience' or RLE).





Artistic Friends
Lesbian Gay
Bisexual Family Transgendered
Quiet Caring
Creative
Silly Light-Hearted
Sarcastic
Comical
Childish
Talkative
English
Caring
Creative
Silly
Light-Hearted
Sarcastic
Comical
Childish
Talkative

12.0

Bob
Fad

No two families are the same

Your daughter or son may have just told you that she/he is lesbian, gay or bisexual (LGB). You might have been wondering about their sexuality for a while, or the announcement might have come as a bolt out of the blue. Perhaps they have yet to 'come out' but somehow you know that they are gay and want to offer your support.

Most parents assume that their children will grow up to be heterosexual (straight). They won't have thought that one day they would hear the words 'Mum. Dad. I've got something to tell you.'

I'm gay!' We know that each family situation is different but most parents find it helpful to know how other parents have coped in a similar situation. It is often helpful to know that your emotions and concerns are shared by other parents who have an LGB daughter or son.

Many parents want to know why their daughter or son is LGB. There are endless theories about sexual orientation. There are theories about parenting; discussions about anatomy; talk of an elusive 'gay gene'. The Nature v Nurture debate has raged for decades and will no doubt continue for years.

Perhaps there is no single answer and sexual orientation is a complex interaction between environmental, cognitive and anatomical factors which shape an individual from an early age. Whatever the theories, as a parent you are now facing the fact that your child is lesbian/ gay/bi. You are probably coping with some complex emotions of your own as well as wanting to understand what is going on for your daughter or son.



Not a choice

The most important thing to remember in understanding your child's sexual orientation is that it is not a choice. No one chooses their sexual orientation. No-one chooses to be straight; no-one chooses to be gay. It is simply a part of them – an important part, but never the less only a part of that person. Given the level of prejudice, bullying and out right homophobia that LGB people face even today, why would anyone 'choose' to be lesbian, gay or bisexual. No-one can

The belief that some people still hold that being LGB is somehow a 'choice' is mistaken.

'make' someone LGB – in the same way that no-one 'makes' a person straight. It might be that your daughter or son approaches you saying that they 'think' they are lesbian, gay or bisexual. They may be questioning their sexual orientation and wondering if they might be LGB. It is a mark of their trust in you that they are willing to share this.

Please accept their questioning and let them know that you will support them whatever their sexual orientation. As they grow up, many young people experiment with different sexual behaviour. It may be that your daughter or son is attracted to someone of the same sex as part of growing up. If this passes, then it was a part of that growing up process - only time will tell. If your child is indeed LGB they won't want to have been told that it's just a 'passing phase' and they will 'grow out of it'.



Supporting your child

As so very many LGB people have told us 'Coming out to your parents is really scary!' Even in the most loving of parent/child relationships, there is that moment of doubt about how your parents may react. Stories of parental rejection, negative reaction from friends or family... will be familiar to your daughter/son. That your daughter or son has told you that they are lesbian, gay or bisexual is a huge step in building an open and honest relationship for the future. Whilst accepting that many people say that they 'felt different' when they were growing up, a lot of LGB people say that they knew they were different to their peers at an early age.

"My son said that he knew he was somehow 'different' when he was nine years old. I found it hard to believe but he is adamant"

Your daughter/son will probably have spent a long time, possibly years taking on board the fact that they are lesbian, gay or bisexual. They will probably have absorbed some of the discrimination, prejudice and negative stereotypes that unfortunately are still around. They will have become familiar with 'teasing' and homophobic bullying and the way that 'gay' can be used as a term of abuse.

The teasing and bullying might not have been aimed at them, but they will have taken on board some of the negativity that even today is associated with being anything other than heterosexual. So no wonder it's 'really scary' to tell your parents you're lesbian, gay or bisexual! Although you might be surprised/shocked by your child's news, try and remember how vulnerable they are feeling. Remember too, that they are still the same daughter or son that you have always



known and loved. Being lesbian, gay or bisexual is part of who they are, not what they are. No-one, gay or straight, is defined entirely by their sexual orientation. They have shared an important part of who they are. Please accept their honesty and openness and move forward together as a family in that spirit.

“I came out to my mother in a random outburst...but her reaction calmed me down and reassured me. I was so relieved because my mother showed me that our relationship had not changed – I was still the daughter she knew and loved.”

Religious beliefs

Discovering that one of your loved ones is lesbian/gay/bi can be particularly traumatic for parents who come from a faith background. It can often cause conflict with deeply held views and can lead to great soul searching and questioning of one's fundamental beliefs.

Strong religious communities provide definite answers to important life questions and also stable relationship structures. Living without these can be a scary experience but many have found that they have been made stronger as a result of their questioning journey.

FFLAG does not presume to offer interpretation on such texts as the Bible, the Koran or Torah but does have members who have faced these issues and who are able to share their experiences with others. Again, contact details can be found on FFLAG's website or by phoning the helpline number.



Parents reaction

Many parents who believe that they are totally accepting of lesbian, gay or bisexual people, and who don't consider themselves prejudiced or judgemental are likely to find themselves, if only temporarily, knocked off balance by an announcement that they have a lesbian, gay or bisexual daughter or son. There are a whole range of emotions that are common to many parents who have just learnt their child is LGB. These emotions can be everything from a sense of loss, guilt, denial, worry, isolation through to relief and affirmation. Some parents feel a sense of loss when their daughter or son comes out.

“When Glynn came out, it felt a bit like bereavement, a grieving for the life I'd had planned for him: the happy and successful life, the daughter-in-law, the grandchildren.”

Guilt is another emotion that many parents experience. Sometimes this guilt is because parents think that they are somehow to blame for their child being LGB. Some parents ask “Where did I go wrong?” This is only an issue if being LGB is thought to be a ‘problem’. It cannot be emphasised enough – no one can make a person lesbian, gay or bi.

Parents can also feel guilty because they didn't know about their daughter or son's sexual orientation. They feel that as a caring and loving parent they have perhaps let their child down by not knowing about that important aspect of their child's life.

“I was distressed to realise that my son knew from around age 11 that he was different, had hoped it was a phase he was going through, and later had prayed he'd be delivered from it. He had been going through something on his own for years and thought he might never be able to tell anyone.



I'd hoped I was a good mother and yet I had been totally ignorant of all of that."

Some parents simply try and deny the facts. They might have wondered if their child could be lesbian/gay/bi, but denied that it could possibly happen to them. Other people might have a lesbian/gay/bi child, but not them!

"I didn't think Gemma could possibly be a lesbian – she had all these pictures of boy bands over her bedroom walls."

On learning their child is lesbian/gay/bi many worries come to the fore. Parents worry that their daughter/son will be ignored or rejected by their friends or other family members or they will be bullied at school. They worry about their child finding a partner and having a loving relationship. They worry about their child's sexual health particularly about HIV/AIDS. Sometimes parents are saddened by the thought that they might not become grandparents.

Many of these worries will not seem as pressing once you have got used to the idea of having a lesbian/gay/bi daughter or son. If you have a positive and supportive attitude to your child's news, family and friends are likely to take their lead from you. Whilst homophobic bullying is a reality, schools and colleges should have anti-bullying policies in place to address this. Your lesbian/gay/bi child is just as likely as their straight friend to find themselves in a loving and fulfilling long-term relationship. Everyone, gay or straight should make sure that they educate themselves about sexually transmitted infections and HIV/AIDS and practise safer sex. Many LGB people have children – different families: same love.

Many parents talk of their sense of isolation when they learn that their child is lesbian/gay/bi. They might be totally accepting of



their child, but still have concerns that they find difficult to share.

“I told a couple of friends at work. They were supportive but really didn’t understand what I was going through. I don’t think anyone other than another parent quite understands the different emotions.”

To some parents it comes as a relief to know that their child is lesbian/gay/bi. They might have known that their child was worrying about something. Perhaps their child had been withdrawn, anxious or depressed. As a loving parent, the imagination can go into overdrive worrying about what is wrong with your child. So learning that your child is lesbian/gay/bi can come as a relief when one thinks about all the real difficulties and problems that could beset your daughter or son. Having a child who is lesbian/gay/bi is not a problem unless someone makes it a problem.

There are people in every walk of life who are successful, happy and fulfilled – and who also happen to be lesbian, gay or bisexual. Once you start to think about it you will become aware of the many people in business, health professionals, teachers, politicians, musicians, actors, lawyers, sportsmen and women etc who are lesbian, gay or bi. There are lots of role models out there, and the list of names of those role models grows all the time. Your child’s sexual orientation will not stand in the way of them achieving whatever goal they set out to achieve.



Emotions are alright

Don't smother your emotions. Some parents will say that they have come to terms and that they accept this is the way their child is, even when feeling upset and confused inside. It is better to tell your daughter or son that their news was a surprise/shock that you were totally unprepared for. Say that you still love her/him and that nothing has changed that, but that you still need time to adjust to the reality.

Get in touch with a parents' support organisation where you will be able to talk through your emotions. It may be that you don't particularly want to talk, but just to listen to other parents' experiences. Joining a Parents' Support group can really help. You can share your worries, listen to others parents' experiences and know that you are amongst people who understand at least part of what is going on for you. Expressing your feelings with someone outside the family, who nonetheless, understands will really help. Even if there isn't a group in your area, talking to another parent or sharing your feelings via email can make all the difference!

Visit www.fflag.org.uk to find your nearest group or to speak to another parent **0845 652 0311**

"I must say going along to a parents' group, was one of the best decisions we've made. I found a group of people who understood and accepted us."



Some parents speak first

Just occasionally parents will realise that their child might be lesbian/gay/bi before their child feels able to approach them. It might be that you have found something that indicates your child might be gay – perhaps accessing gay websites. It might be that someone outside the family has said something to you.

What lesbian/gay/bi people generally say is that for them, the easiest way for the subject to be brought up would be if one of their parents were to say something like the following: 'I've wondered for a while if you might be lesbian/gay/bi. If you are, I want you to know that it makes no difference to the love that I feel for you. I will always do my very best to support you. Whether you are lesbian/gay/bi or not, I love you, and if you want to, let's talk about things' In some families it might be better to write something rather than speak.

Even young people who clearly know that they are lesbian/gay/bi can have difficulty in accepting the reality – and putting it in to words to your parents, makes it very real.

This perhaps can provide a bridge for the child who may be anxious to talk but is unable to find the words. Your child might well deny that they are lesbian/gay/bi. You might have read the signals wrong or it might be that they simply aren't ready to tell you yet. But gradually and gently restate, over a period of time, your love for your child and the strength of that bond. In that way you will create an atmosphere in which it is easier for your daughter or son to talk to you when they are ready.



Language

Language continually evolves and words that were once in common usage become less so – their meanings change and some come to have negative connotations. Using the term homosexual to describe a lesbian/gay/bi person is now considered to be offensive. The negative connotation of the word homosexual came from religion (the ones that are against homosexuality) and also from early psychoanalysis.

For many years it was believed that lesbian/gay/bi people could be changed to be heterosexual (straight). There is still that totally mistaken belief held by a minority of groups/individuals. If the word 'homosexual' appears in the press/media it is usually because the user is anti-gay or has little understanding of/empathy towards lesbian/gay/bi issues.

Terms like 'sexual preference' or 'alternative lifestyle' are not considered appropriate as they imply that lesbian/gay/bi people are making a choice.

Moving forward

If your daughter or son wants to bring their girlfriend/boyfriend/partner to meet you, that is a measure of their regard for you and their need for your approval. It might take a while for this to happen, but when it does, it is likely to be a big step for each and every one of you. Your child is trusting you to offer the same level of welcome and hospitality that you would offer any other member of the family. The warmth and sincerity of your welcome will help strengthen family relationships. "Open your mind, ears and heart. If your child trusts you enough to show you who she/he really is, live up to that trust!"



Trans support

FFLAG recognises the difference between identifying as transgendered/ transsexual and identifying as lesbian, gay or bisexual(LGB). For trans people the issue is gender identity and for LGB people it is sexual orientation. Although our expertise and experience is around supporting families and friends of lesbian, gay and bisexual people and issues of sexual orientation we work closely with members of the trans community. Together we work to educate, to inform and to address the homophobia and transphobia that our daughters and sons often face.

If you are looking for expert advice and support on all issues relating to gender identity do contact GIRES (Gender Identity Research and Education Society - www.gires.org.uk). GIRES is also the umbrella organisation for The Beaumont Society, Women of the Beaumont Society and Mermaids among others. Mermaids offers support and information for children and teenagers who are trying to cope with gender identity issues, and for their families and carers.

We are confident that you will find the information and support that you need from GIRES and their affiliated organisations. If there is anything further that the FFLAG team can do to support you, your family/loved one or friend, do please contact us via email info@fflag.org.uk or call our helpline, **0845 652 0311**.

13.0

helpines &
lgbt
organization
in northern ireland

Art of Friends
Lesbian & Family
Bisexual
Gay
Transgendered
Comical
Sarcastic
Caring
Creative
Strong
Quiet
Ambitious
Sweet
Childish
Light Hearted
Optimistic
Talkative

Belfast Pride

web: www.belfastpride.com

Organises Belfast's annual gay pride celebrations.

Belfast Butterfly Club

PO Box 210, Belfast, BT1 1BG

tel: (028) 9267 3720

web: www.belfastbutterflyclub.co.uk

A social/support group for transgender, transvestite and cross-dressers regardless of sexual orientation.

Belfast Out Resource Centre (BORC)

c/o 64 Donegall Street, Belfast, BT1 2GT

web: www.borc.org.uk

Community-based organisation whose objective is to establish and provide a resource centre in Belfast to serve the LGBT community.

Cara-Friend

64 Donegall Street, Belfast, BT1 2GT

tel: (028) 9089 0202 [admin]

web: www.cara-friend.org.uk

Cara-Friend operates Northern Ireland's gay & lesbian helpline services providing confidential information and support. It also operates an LGBT youth project called GLYNI.

Gay/Bi Men's Helpline: (028) 9032 2023

Mon, Tues & Wed from 19:30 – 22:00

Lesbian Line: (028) 9023 8668

Thurs from 19:30 – 22:00

Gay & Lesbian Youth Northern Ireland (GLYNI)

email: inbox@glyni.org.uk

web: www.glyni.org.uk

GLYNI is a youth group for young lesbian, gay & bisexual people aged 16-25 years.

Causeway LGBT Network

tel: 07910980314

web: www.causewaylgbt.co.uk/

A social and support group for the LGBT community in Portrush, Portstewart, Coleraine, Ballycastle, Ballymoney, Castlerock, Bushmills and Limavady.

Coalition on Sexual Orientation (CoSO)

64 Donegall Street, Belfast, BT1 2GT

tel: (028) 9089 0201

web: www.coso.org.uk

An umbrella organisation for LGBT groups in Northern Ireland representing their views in government legislation and debates.



Gay Police Association (GPA)

tel: 07841 538 972 (Vincent Creelan)

email: vincecreelan@btopenworld.com

web: www.gay.police.uk

Offers advice & support to gay police service employees.

Guys & Guys

c/o The Rainbow Project

2-8 Commercial Court, Belfast, BT7 1HP

tel: (028) 9031 9030

web: www.rainbow-project.org

A social/support group for gay and bisexual men who have learning disabilities.

L+ [new]

web: www.lplus.org.uk

L+ is a social and activity based group for older LGBT people

Ladz Project

The Rainbow Project, 12a Queen Street, L'Derry,

BT48 7EG

tel: (028) 7128 3030

web: www.rainbow-project.org

A youth group for young gay and bisexual men in the North-West.



Lesbian Advocacy Services Initiative (LASI)

PO Box 3, Ballymena, BT42 9AA

tel: (028) 27641463

web: www.lasionline.org

Works to improve the quality of life and enhance the voices of lesbian and bisexual women in Northern Ireland.

LGBT Societies / Students

Queen's University Belfast

web: www.qublgbt.org.uk

NUS LGBT

web: www.nusonline.co.uk/lgbt/

USI LGBT Campaigns

web: www.usilgbt.org/

Limavady Gay Men's Support Group

email: reid65@hotmail.com (Contact person: Mervyn Reid)

Support/social group for the LGBT community in the Limavady Area.



Live and Let Live Group

2 Dacre Terrance, L'Derry, BT48 6JU

tel: Sean Morrin @ The Rainbow Project for more info – (028) 7128 3030.

An AA support group for LGBT people. Meets every Wed. @ 8.30pm.

Men of the North

web: www.menofthenorth.com

Social group for gay/bi men 25 years and over that offer an alternative scene.

Newry Rainbow Community (NRC)

web: www.gaynewry.com

Information, befriending, support and advice for the LGBT community in the Newry area.

Gay & Lesbian Across Ards (GLAD)

tel: 07813 945411 [contact person: Andrew Muir]

web: www.ndalgbt.com/

A social/support group for lesbian, gay, bisexual and trans people in the North Down/Ards area.



Northern Ireland Gay Rights Association (NIGRA)

c/o 64 Donegall Street, Belfast, BT1 2GT
tel: (028) 9066 5257 or 07913 224163
*LGBT equality issues, consultation, legal advice &
24 hour support for hate crime victims.*

Out & About Walking Group

web: www.outnabout-ni.org.uk/
*Belfast-based group who arrange monthly walks,
occasional nights out and weekend trips for the
LGBT community and their friends.*

Out in the City

web: www.gaynewry.com
*Youth group for 16-20 year olds in the Newry area
who are lesbian, gay or bisexual. Meets in the
Magnet Centre, Hill Street.*

Queerspace

64 Donegall Street, Belfast, BT1 2GT
web: www.queerspace.org.uk
*Community/social group for all members of the
LGBT community.*



Quire

web: www.quire.org.uk

Belfast's first and only LGBT choir, performing at various events throughout Northern Ireland and beyond.

shOUT

YouthNet, 5th Floor, Premier Business Centre, 20
Adelaide Street, Belfast, BT2 8GD

tel: (028) 9033 1880

web: www.youthnetni.org.uk

Researching the needs of young lesbian, gay, bisexual & transgender people in Northern Ireland.

Strabane LGBT Group

email: stephen.birkett@btinternet.com

(Contact: Stephen Birkett)

Support/social group for the LGBT community in Strabane.

Sunday Scene

64 Donegall Street, Belfast, BT1 2GT

tel: (028) 9023 8668

web: www.lesbianlinebelfast.org.uk

Social group for lesbian and bisexual women. Meets on the 3rd Sunday of each month.



The Gathering (Gay Men's Spiritual Group) [new]

web: www.gathering05.co.uk

For Gay/Bisexual men who wish to explore and develop the spiritual aspect of they are.

The Rainbow Project

Belfast Office

2-8 Commercial Court

Belfast

BT1 2NB

t: (028) 9031 9030

f: (028) 9031 9031

Foyle Office

12a Queen Street

L'Derry

BT48 7EG

t: (028) 7128 3030

f: (028) 7128 3060

email: manager@rainbow-project.org

web: www.rainbow-project.org

We promote gay and bisexual men's health & wellbeing by providing professional counselling services, support, information, advocacy, groupwork, outreach, drop-in, training, homophobic incident reporting, volunteering opportunities and research.

We have a centre in Belfast and one in Foyle, L'Derry.



The HIV Support Centre

The Warehouse, 7 James Street South, Belfast, BT2 8DN

tel: (028) 9024 9268 or Confidential Freephone

Helpline: 0800 137437

web: www.thehivsupportcentre.org.uk

Information/support/advice on HIV & AIDS for men & women regardless of sexual orientation.

Trans Foyle Group [new]

Contact The Rainbow Project in Foyle or shout for more information.

A support group for young male-to-female (MTF) and female-to-male (FTM) trans people based in L'Derry.

Traveller & Gay

Contact The Rainbow Project in Foyle for more info. Support service for the gay travelling community in N. Ireland.

Ulster Titans RFC

email: ulstertitans@hotmail.co.uk

web: www.ulstertitans.com

Northern Ireland's Gay Rugby Team.



UNISON LGBT Group (N. Ireland)

tel: Contact Sean Morrin @ The Rainbow Project for
more info (028) 9031 9030

web: www.unison.org.uk/out/

Committed to working for LGBT rights at work.

SEXUAL HEALTH / G.U.M. SERVICES

BELFAST: Royal Victoria Hospital
(028) 9063 4050

COLERAINE: Causeway Hospital
(028) 7034 6028

L'DERRY: Altnagelvin Hospital
(028) 7161 1269

NEWRY: Daisy Hill Hospital
(028) 3083 5050



Final Logo