

# A GUIDE ON STI PREVENTION AND TESTING

Safety & Wellness Guides for Queer Zimbabweans

Sexually transmitted infections (STIs) are infections passed primarily through sexual contact. Anyone can contract an STI, but risks can vary depending on things like the type of sex you're having, how often you're getting tested, the number of partners you have, and the kinds of protection you use.

Sexual and gender minorities often face added barriers to accurate information and affirming healthcare, from provider bias to limited access. That makes having reliable, inclusive resources on STI prevention, testing, and treatment all the more important.

## PREVENTION

### Use Barriers (Condoms & Dental Dams)

Condoms—both external (sometimes called "male") and internal (sometimes called "female") are effective in reducing the risk of many STIs during vaginal, anal, and oral sex.

Dental dams can protect against infections during oral sex. Always use a new condom or dental dam for each act and with each partner.

### PrEP (Pre-Exposure Prophylaxis)

PrEP is a daily medication that significantly reduces the risk of HIV for HIV-negative individuals. It's especially useful for those at higher risk, including queer and trans communities. Talk to a healthcare provider about whether PrEP is right for you.

### PEP (Post-Exposure Prophylaxis)

If you think you've been exposed to HIV, PEP can help prevent infection. It must be started within 72 hours, so act fast and contact a clinic or emergency healthcare provider immediately. PEP is for emergencies not a regular prevention strategy.

#### • Get Vaccinated

Vaccines offer important protection:

- The HPV vaccine is recommended up to age 26 (and sometimes beyond) and helps prevent genital warts and cancers.
- Hepatitis B vaccination is recommended for those at higher risk, including people with multiple partners and those engaging in anal sex.

### Get Tested Regularly

STIs aren't always obvious many are asymptomatic. Regular screening helps detect infections early and protects your partners, too. Aim for:

- At least once a year if you're sexually active.
- Every 3 to 6 months if you have multiple partners, engage in higher-risk sex, or use dating/hook-up apps.

### Practice Safer Sex Communication

Talk openly with your partners about testing history, STI prevention, and what protection looks like for each of you. Safer sex starts with consent, honesty, and shared responsibility.

### Limit Sexual Partners

While there's no "right" number of partners, reducing the number of simultaneous partners can lower STI risk. What matters most is communication, testing, and safety not judgment.

### Don't Share Sex Toys (or Clean Them Well)

If you use sex toys, clean them thoroughly after each use. If sharing, use a condom on the toy and change it between partners to avoid transmission.

## COMMON STIS AND TESTING

Here are some common STIs, how they're tested, and what you should know:

### HIV

- Test: Blood or oral swab
- Frequency: At least once a year, more if at higher risk
- Treatment: Antiretroviral therapy (ART) keeps HIV manageable and prevents transmission

### Chlamydia & Gonorrhea

- Test: Urine sample, throat/rectal/vaginal swabs (depending on sex acts)
- Symptoms: Often asymptomatic; may include pain, discharge
- Treatment: Antibiotics

### Syphilis

- Test: Blood test or swab of sores
- Symptoms: Sores, rashes, flu-like symptoms
- Treatment: Antibiotics (usually penicillin)

### Herpes (HSV-1 & HSV-2)

- Test: Blood test or swab if sores are present
- Symptoms: Blisters, sores, itching
- Treatment: Antivirals can reduce outbreaks; no cure

### Hepatitis B & C

- Test: Blood test
- Symptoms: Fatigue, jaundice, nausea
- Treatment: Antivirals; Hep C is now often curable

### HPV (Human Papillomavirus)

- Test: Pap smear (for people with cervixes) or HPV DNA test
  - Symptoms: Often none; some strains cause warts or cancer
- Treatment: No cure, but vaccines and screenings help prevent complications

## TREATMENT FOR STIS

- Antibiotics are effective for bacterial STIs like chlamydia, gonorrhea, and syphilis. Always finish the full course.
- Antivirals help manage viral infections like herpes and HIV.
- Pain relief and symptom management (like for herpes sores) are available over the counter.

## SEXUAL AND GENDER MINORITY-SPECIFIC CONSIDERATIONS

### Transgender and Non-Binary Individuals

- Transgender and non-binary people may face unique healthcare needs, particularly if undergoing hormone therapy or gender-affirming surgeries. It's crucial to talk to healthcare providers about STI testing needs, including anal, oral, and genital screenings based on sexual behavior rather than gender.

### Men Who Have Sex with Men (MSM)

- MSM, particularly those with multiple partners or without consistent condom use, may be at higher risk for STIs like syphilis, gonorrhea, and HIV. Regular screening, condom use, and PrEP are essential preventive strategies.

### Lesbian and Bisexual Women

- While the risk of contracting HIV is lower among lesbian and bisexual women, they are still at risk for other STIs, such as chlamydia, gonorrhea, and HPV. Regular testing and using protection (e.g., dental dams) during oral sex are important.

### Queer and Gender-Diverse Individuals

- It's important to access culturally competent healthcare providers who are sensitive to the sexual health needs of queer and gender-diverse individuals. Ensuring that healthcare settings are welcoming and nonjudgmental is vital for testing and prevention.