Having It, Not Having It, Hearing Other People Having It

WELCOME TO THE SEX CHAPTER!!!

Yes, it's getting hot in here. Sorry, but before turning the page, you need to consent. Do you promise to ask yourself and your partner the following questions before getting naked

- 1. Did your partner say or clearly indicate YES
- 2. Did you say or clearly indicate YES?
- 3. Is everyone who said or indicated YES sober?
- 4. If you say NO during sex, is your partner prepared to stop?

 5. If your partner says NO during sex, are you prepared to stop?

If consent is unclear; don't have sex. YES means YES. Clear consent is about protecting you and your partner

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Dear Harlan,

I always told myself that I would wait to have sex, but last week, in the heat of the moment, I kind of lost my virginity and now I regret it. My problem is that he still wants to see me, but I'm stuck on this guy who lives a floor below me and who I hooked up with once last month. We didn't talk much after that, but now I see him everywhere. He's always smiling at me. I really like him and want to start something more. What should I do to make him notice me again? Should I just forget about the guy I lost my virginity to? I need help.

—Extremely Confused

Dear Extremely Confused,

You can always have sex with the guy you now like—that will get him to notice you (for at least a minute). And NO—I'm not serious....

You "kind of" made a mistake losing your virginity, and now you kind of have to fix it. But before doing anything, figure out why it happened. Think about what you're using sex for. If it's to get a guy's attention, find a better technique. Slow down and be careful.

Now, regarding your situation—talk to the guy you slept with, just in case you and the sex actually meant something to him, and assure him that he didn't do anything wrong. Let him know that it just doesn't feel right to be a couple. As for the guy a floor below you, it seems that you already have his attention. Start with a conversation and keep your clothes on, so as to not get his attention using sex. You might not be a virgin anymore, but you can still "kind of" wait to have sex with another guy.

Another thing to keep in mind—be careful when using sex as a way to get attention. Things like bad

reputations, sexually transmitted infections, and children (that you'll give birth to) can end up following you around for years. And then, when you do find someone whom you want to date for more than a night, the past might become an issue.

Tip #65 Deciding to Do It

The Tip

Make sure the first time is with someone comfortable.

The Story

When I got to college, I was a virgin. I had dated, but never felt ready. I had kept my virginity. When I came to college, it was easier to have sex. People talked about it as if it wasn't a big deal. Hearing all the conversations made it matter less and less. I ended up losing it my freshman year to a guy that I was kind of dating. It wasn't great, but he made it comfortable. He was also a virgin. We talked a lot. He was surprisingly sensitive. The most important thing is to make sure that it's with someone comfortable. It wasn't physically all that great and it was much more comforting to be able to talk about everything. I could not have imagined doing it with some hookup from a party. I know a lot of friends who lost it to someone who they barely knew. That, I would have regretted.

—junior, University of Montana

Sex Fact

College students reported having the following number of sexual partners (for oral sex, vaginal, or anal intercourse) within the last 12 months: 34.1 percent of men and 31.6 percent of women report having NO sexual partners in the last 12 months.

—ACHA-NCHA-II Executive Summary Spring 2016 If you've already done it, DO NOT skip this tip. In fact, I'm going to give back your virginity just for visiting this tip. Here. It's back. I can do that. It's part of being an advice columnist and author. So, for all you virgins and nonvirgins, it's safe to assume that some of you are planning on having sex in college. And a lot of you are planning on NOT having sex. Considering that roughly 80

percent of students graduating from college have done it, many of you who are planning not to do it might decide to do it in the future. Just in case you choose to, keep reading...

When deciding to have sex, keep the following virgin questionnaire in mind. If possible, copy this checklist and

keep it close to you when making your decision. You have my permission to reproduce it and keep it in your pocket. If you don't have pockets, keep

"My friend was a virgin for eighteen years and he said to her, 'You look like you listen to rock music,' and then she lost it."

—freshman, University of Nevada–Las Vegas

it in your sock. If you're not wearing socks, then stash it in your underwear. If you're not wearing underwear, then it's probably too late...

O Why do you want to have sex with this person?

- O Can you discuss sex with this person? O Are you able to offer and get clear consent while sober? O What will happen after the sex? O If you say NO or WAIT, will your partner listen and wait? (Practice this.) O Are you single? Is your partner single? O Do you have contraception (including condoms)? O Have you asked your partner about herpes, genital warts, and other sexual souvenirs? O Do you want to give this person something so special? (And no, you can't get it back once it's given. If anyone says that, that person is trying to get you in bed again.) O Have you talked about what would happen if someone got pregnant? O Are you doing it because you want to or because you're feeling pressure? (If you're afraid the sex won't be
 - O Are you sober? Is your partner sober?

around tomorrow, it's not a good idea to have it today.)

- O Are you afraid sex will ruin the relationship?
- O Is this decision in alignment with your values and religion?
- O Will it be awkward to see the person the next day?
- O Is it happening in a comfortable place (not while your roommate sleeps)?
- O Does it feel 100 percent right?
- O Do you know the person's first and last name? Can you spell it? Can you pronounce it?

Besides the whole sexually transmitted infection thing and pregnancy scare factors, there is the emotional factor. Sex is intense and it can bring on a flood of emotions. Unless you're sure it's right, and unless you're with someone who makes you comfortable, it's not right.

Bottom Line

When in doubt, don't do it.

FYI: Some STDs/STIs can be transmitted even when a condom is used.

Tip #66 Deciding Not to Do It

The Tip

If you can't talk about sex with the person you're going to sleep with, then you obviously aren't mature enough to have it.

The Story

I met my boyfriend at college. We started going out about one week into school and seemed to be really compatible. We talked about everything, including sex. I told

him that I didn't want to ruin my chance at life by getting some disease or becoming pregnant, because honestly, I'm just too selfish right now to have a whole other human being depending on me. We talked it out, and still do, and he com-

"I'm not gonna lie, I really wanted to have sex. He had his pants down and asked me. We were more than friends, but not yet official. I got to thinking a little harder and decided it was a bad idea, since we weren't official. I told him no. It turns out that we never dated. I am so thankful that I did not lose my virginity to him."

—sophomore,
San Diego State University

pletely respects my decision. Talking about it even made him respect me more, and made him feel like I really trusted him and felt comfortable enough to share that sort of thing with him. If anything, talking about waiting has brought us closer together.

—freshman, Redlands College

Consent Is a Simple Conversation

It's a conversation inviting someone to get it on that happens while sober. The person can answer YES or NO. Yes means you get it on. NO means you respectfully move on. If you can't handle NO, you are in NO position to have sex. For more info on consent, check out www.itsonus.org.

Sex is always available. Waiting is always a choice.

According the National Institute of Virginity (this isn't real), a virgin walks by you every 3.5 minutes. Actually, I made up that statistic and the Institute, but the point is that virgins are all around you. They're everywhere. It's just that not everyone flaunts it. A truthful stat reports that more and more teens are waiting longer to have sex.

Some wait for religious reasons.

Some don't want to risk getting pregnant. Some aren't emotionally ready. Some just haven't found the right partner worthy of the honor. And then there are the reluctant virgins—those who want it, but can't get it. But really, if you want sex badly enough, you can find someone who is desperate enough, lonely enough, intoxicated enough, or affordable enough (not recommended). Choosing to have sex is easy. Waiting until it's right—that's the challenge. Virgins make a choice. It's not a curse—it's a gift.

If you're a virgin, hang on to it for a while. Whatever you do, avoid losing it by accident, while under the influence, due to pressure, or out of fear of losing someone. Never feel pressured to get rid of it. Make sure that when you confide in a partner that you're a virgin, you also make it clear that virgins can be sexual and sensual people. Being a virgin doesn't mean being a prude. It just means that you are extremely selective. Many virgin men and women have

confided in me—some people don't always want to date a virgin (clearly they don't understand that virgins can still be sexual). Still, there are a lot of people who find virginity extremely attractive. There are so many people who will be so excited to not make love to you, not have to worry about pregnancy scares, not have to worry about STDs/STIs, not have to deal with contraception, and not have to deal with all the emotions that go along with having sex!

And to you virgins who judge people who want to have sex with you—just stop. Some people want to be in a sexual relationship built on love, mutual respect, and trust before marriage. It's a personal choice, just like not having sex is a choice. Respect their choices and be sure to remind them that you're worth the wait. Also, make it clear that being a virgin doesn't mean that you're not sexual—in fact, you can explain what you'll do and won't do—that might pique their interest and clear up the confusion.

Bottom Line

Being a virgin doesn't mean you can't have sex. It means you choose NOT to have sex. And that's hot.

Tip #67
Doing It Way Too Much

The Tip

It's easy to have sex once you start. Pace yourself.

The Story

I started off as a virgin in college. It wasn't for religious

reasons; I just didn't find the right person to be with. I lost my virginity the first month in college. Once it was gone, it

"It's just expected now; you go to a party, you hang out, and then something sexual will happen."

—senior, Alfred University

became so much easier to have sex. There wasn't the pressure of, "Wait, hold on, oh my god, I'm a virgin. Ahhhh." What happened to me next is the bad part. I kind of started being too promiscuous. I'd go out, party, and come home with some different partner. No, I never got an STI that I know of or anything like that, but I was with some people who I would have never been with normally. I lost control. It seemed like fun at the time, but I wish that I had, let's say, been more selective. It's hard when you see the people you slept with freshman year on campus like at the library or at a game. I'm not proud of the past.

-senior, University of Oklahoma

* * *

If you've been trying to read this tip but keep getting distracted because you keep having sex (with someone or alone), then you're probably doing it too much.

"Losing your virginity doesn't have to mean losing high standards. Despite losing my virginity, I have yet to have sex with another person."

—freshman, Gonzaga University

For some students, sex is used as a way to escape reality; for others it's a way to feel connected. With no curfews,

no parents, and no one other than yourself to watch over you, the decision is yours to make.

Be aware—the most common problem with new students is that sex is sometimes used as a crutch to make it through the whole transition (this includes the use of online porn). Look at it like this—a new student on a new campus

is naturally uncomfortable. One way to feel connected for ten minutes, or five minutes, or thirty seconds (depending who you're with) is to have sex. It's a quick fix, a fast connection, and a way to feel like you're not alone.

Fast sex (or random sex) is often just a temporary distraction from a bigger problem. It's an ego boost, it's a drug, it's an escape, it's a way to feel comfortable in an uncomfortable place. Beware: it can even be an addiction. The problem is that when the sex ends, Doing It Way Too Much... Alone?

Porn addiction is real. If you're missing classes, avoiding real-life interactions, or are unable to have real sexual encounters—get help.

you can end up hurt, pregnant, with an STD/STI, with a bad reputation, in a dangerous relationship, or confused—wondering if someone likes you for you or only for the sex and leaving you feeling even more uncomfortable and alone.

Besides using sex as a crutch, there's also the "he/she's too easy" phenomenon. This is when a guy or a girl has

"Just because a girl has sex doesn't mean that she's a slut."

—junior, Angelo State University

sex, enjoys the sex, but is then disappointed because the sex was so easily offered by his or

her partner. It's a post-coital loss of respect. In retrospect, the partner wishes the sex had been denied for longer. The longer the wait, the better the couple can get to know each other. The better they know each other, the more meaning

behind the sex. There's really nothing to be gained from having sex too soon (other than STDs/STIs and possibly children—see tips to follow). Want to get to know someone? Keep your pants on.

Be Prepared for a Sex Emergency

Consider carrying two condoms with you just in case one breaks or tears while it's being put on. Both men and women are equally responsible for preventing STIs and using contraceptives, and both should carry condoms.

—The BACCHUS Network

Having sex too soon is best described by using the analogy of building a new house—until the walls are up, the roof is shingled, the plumbing is in place, the electricity is flowing, and the carpets are installed, entering the house can be dangerous. Should you go into someone's "house" too soon or invite someone inside yours, always use a hard hat. You never know what you're getting into or who was there last.

Bottom Line

If you're having sex again while reading this tip, it's definitely way too much. Visit SAA-Recovery .org/ for info on sex addiction.

Tip #68

The One-Night Stand

The Tip

Make sure sex is consensual. "No" means no. That goes for the person saying it and the person being told it. The Story

When a guy is getting into a random hookup, he needs to make sure it's consensual. I have a good female friend on another campus who was intoxicated and was with a guy who wasn't intoxicated. They had sex. She says that she never consented to it. She pressed charges because she thought that he took advantage. Guys are in a vulnerable position when engaging in a one-night stand. I'm extremely careful. I won't do anything with any woman unless she says it's all right. It's just not worth it.

-freshman, Earlham College

* * *

The scene: It's a hot night. You're at a party. The music is playing. You've had a long week. Midterms were hell.

You just broke up with your boyfriend/girlfriend. You've had a couple drinks. You're looking to relax and blow off some steam. You then find yourself kissing someone

"As a rule, we'll only stop our friends from taking someone back to their place if they're in a relationship or if the person is totally unattractive. Beer goggles can do that."

> —senior, University of Nevada–Las Vegas

you never imagined kissing. You think, I've never done this before, it's college, I'm looking for some love, and someone to hook up with... Things get intense. The heat is blazing. You can either end the night by getting his/her number, or you can just go home together and do it. What you do is up to you. It's one night—one night that can cause weeks, months, or years of aggravation and problems.

Reasons to avoid the one-night stands:

• Condoms are not always effective in protecting you

from the elements. It's hard to know where or with whom your partner has been. It's even harder to trust him or her to tell you the truth.

• Sex makes some people crazy—they have a one-night stand and then want to spend the rest of their life

with you. Can you say stalker?

"Yes" Means Yes

California passed a new law that requires sexual partners to get clear consent while sober. This means anything other than clear consent can be interpreted as sexual assault.

- Someone might be in a relationship or living with someone who might not take kindly to you having sex with his or her partner.
- It's hard to know if you've gotten someone pregnant or gotten pregnant.
- It's uncomfortable to see your one-night stand around campus

days, weeks, months, and even years after the sex happens. People who have seen each other naked can never look at each other the same way again.

- If drugs or alcohol are involved, you don't know for sure if the sex is consensual.
- You might change your mind and your partner might not be willing to listen—this is when things get dangerous.
- It's confusing and fleeting, and can consume your time and energy the next morning, when you work through the drama following the walk of shame.

* * *

If a one-night stand happens (and it does happen for some people), be smart about it. Make sure it's what you want. Make sure both of you understand that it's a one-night

thing. Make sure that you use protection and that you ask your partner about his or her sexual history. Make sure you are alert, awake, and aware.

Bottom Line

You might be asking, "If the hookup sex happens during the day, is it still considered a one-night stand?" The answer is, technically, it's a one-day stand. But you can still call it a one-night stand to help others understand.

Tip #69

Pimps, Hos, and Reputations

The Tip

News travels fast, especially on a smaller campus.

The Story

When someone does something with someone, other people on campus will know about it. The smaller the campus, the faster the news travels. It can be as bad as high school. A

guy will know if you're a girl who sleeps around or doesn't sleep around. What you do becomes

"Never sleep with more than one person in a fraternity or sorority. Everyone will know what you did."

—senior, Ohio State University

public knowledge. I'm a pretty good girl when it comes to what I do, but the one time I did hook up and went a little too far, I heard about it from people who barely knew either of us. Everyone loves to talk

about who did what with who. What you do will totally follow you around. On a bigger campus, that's not so true. It's easier to get lost in the crowd, but it's not true on a smaller college campus—not at all.

-junior, DePauw University

* * *

Reputations are like bad gas—they can follow you for a very long time.

The smaller the campus, the more the reputation sticks to you. When it comes to what happens in the bedroom (or at the library, or in the laundry room, or wherever you find yourself in an intimate moment), news travels fast. People talk. They talk a lot. And now, with Facebook, texting,

Sex Fact

College students reported having the following number of sexual partners (for oral sex, vaginal, or anal intercourse) within the last 12 months: 11.5 percent of men and 8.2 percent of females report having 4 or more sexual partners.

—ACHA-NCHA-II Executive Summary Spring 2016 Twitter, Tumblr, Snapchat, and sexting, news travels even faster. You might as well put the story of your affair in the campus newspaper (no explicit photos, please).

You might not realize it, but when you sleep with someone, there's a good chance other people will find out (especially if you are in someone's room while that person's roommate is sleeping). When you sleep with someone and then sleep with their friend, there's an even better chance that someone

will find out (especially if you're sleeping with them both at the same time and in the same bed). If you sleep with someone and then sleep with their friend and then sleep with two more of their friends, everyone will know. Then you will either be known as easy, a manwhore, a manbo, or some other expression that isn't all that endearing. And

then, when you do find yourself wanting to have a serious
relationship, the person whom
you want to take you seriously
won't. And even if he or she
does want to be with you, the
fact that you've slept with his
or her friends makes it close
to impossible. It takes years to
change reputations. Be careful
making them.

Should you make a habit of sleeping around, bring a change of clothes with you so that you don't have to take your walk of

Second Sexting Warning

40 percent of teens and young adults say they have had a sexually suggestive message (originally meant to be private) shown to them, and 20 percent say they have shared such a message with someone other than the person for whom it was originally meant.

—National Campaign to PreventTeen and Unplanned Pregnancy

shame in your evening wear. There's nothing more obvious than a woman in a miniskirt and sequined top or guy with black pants and leather shoes walking the streets at nine in the morning on an eighty-degree day.

Bottom Line

Quick note: it's hard to deny sleeping around if you've slept with most of the people on campus.

Tip #70

Sexual Souvenirs

*Note: STDs and STIs are the same thing. *Note: STDs and STIS and "The Chlamydia Jive" and "The Syphilis Song"

at www.HarlanCohen.com/NakedRoommateGoodies.

The Tip

Herpes isn't an end-all. We all have baggage.

The Story

My friend and I decided to hook up when I was visiting him. We discussed our status and our last time being checked for STIs. Two weeks later, I got symptoms I immediately recognized as herpes. A trip to the doctor and a culture told me what I already knew. I called my mother and told her the news, holding back tears. Funny enough.

"Girls should definitely get a Pap smear every single year, whether you are 'sexually active' or not. I had very little and non-risky sexual contact and ended up getting HPV on spring break, which I would not want anyone to have to go through."

-sophomore, Miami University (Ohio)

it turned out both she AND my aunt have it. I contacted my friend from before, and at first he thought I put HIM at risk. Turns out he did not know that the cold sores on

his mouth were herpes and transmissible genitally. He gave it to me when he gave me oral sex. The first few months I was very afraid to date or hook up. The word "herpes" was frightening, but I decided to say it until it wasn't anymore. I tell anyone and everyone that I have herpes if the conversation goes that way. It's baggage, but it's only a small

addition to my closet of issues and flaws I've accumulated. And that closet is just part of the house that is me—which I believe is full of so many wonderful things that make me worth dating! Funny enough, when I did have to relay the

news to a crush, I was more worried that he DIDN'T care. We've been dating over six months, and it's been a year since I contracted

"My roommate freshman year caught pubic lice from the bathroom toilet. She wasn't sexually active and realized what had happened after a red and raw rash broke out."

—senior, Manhattan College

herpes. I've remained outspoken about it and it's brought only good to my life. Every time I tell my story, I meet another person who contracted either herpes or another STI, and they always are grateful to meet someone else who has it. When we don't talk about it, it remains this stigma that it only happens to dirty, gross people. But it can happen to anyone having sex—of any kind!

-senior, University of Kentucky

* * *

Some people come home with a souvenir shot glass from college. Some people come home with a T-shirt bearing a school mascot. Some people come home with herpes, genital

"One of the girls I know just got genital warts. She was sleeping with this kid who was pretty active. She was scared to confront him. She didn't want to accuse him, but she wanted to inform him in case he didn't know so he wouldn't give it to someone else."

—junior, Western New England University

warts, and chlamydia. If your hobby is collecting STIs (also referred to as STDs or sexually transmitted diseases), college is THE PLACE to do your collecting. The challenge—you

don't always know who has them and who doesn't have them. People don't wear signs or T-shirts saying, "Hi, I've

"It's been two years since I found out I contracted genital herpes. At first, it made me feel worthless, like what did I do to deserve this? After turning to alcohol to try and cope and waking up in a hospital room from drinking too much, I decided to talk to the counselor at school. It was very difficult to speak about it...Through counseling I realized I wasn't a bad person. And that it was much more common than I thought. Just because I have herpes doesn't mean I won't be loved. Since being diagnosed and reaching out for help, I've had a sexually active relationship. The herpes made me more cautious about who I share myself with...I don't see that as a bad thing."

-senior, Southern Vermont College

Got Herpes." (Visit my website to get your sex souvenir T-shirt.) The STI truth is that—brace yourself—one in five college-age people have at least one (and some say the percentages are even higher).

According to the U.S. Centers for Disease Control and Prevention, in the United States, one of every six teenagers and adults is infected with genital herpes.

Women are more commonly infected than men, and it is estimated that one of every four women has herpes. Health experts estimate that there are more cases of genital HPV infection than of any other STI in the United States.

Chlamydia is the most common bacterial STI. It's known as a "silent" disease because the majority of infected

"We had a chlamydia outbreak on our campus. My best friend had a genital warts outbreak on her campus."

—junior, small campus in Indiana

people have no symptoms (this is why it's so important for sexually active women to get annual or semi-annual checkups).

Beyond the whole physical side of STIs, there's the emotional part of it. With many of these STIs, once you get

them, they stay with you for the rest of your life, and they change your life. You have to tell your future partners. As for how you get these things, while condoms are effective, they don't always protect you. So, if you plan on rubbing yourself against someone else, cover up and be sure to get their sexual history.

Should you suspect that you have a sexual souvenir, get tested quickly. Many STIs can be detected with relatively little discomfort. A little urine or blood, or a few cells can do the trick. Should you test positive, there is treatment available to eliminate or help control outbreaks. If you are positive for an STI, consider getting professional support if you experience feelings of shame and humiliation. I can promise you that you will still be desirable and loved. Millions of people live

HPV Fast Facts

- Genital HPV is spread through skin-to-skin contact.
- Genital HPV cannot be entirely prevented by condom use.
- This virus is often asymptomatic—people usually do not know they have it.
- At least 50 percent of sexually active men and women acquire genital HPV at some point in their lives.
- HPV can be contracted from one partner, remain dormant, and then later be unknowingly transmitted to another sexual partner, including a spouse.
- Some types of HPV cause cervical cancer.
- Although smoking does not cause HPV, it increases the risk of getting an HPV infection by three times because the body is less able to fight the infection.

—BACCHUS Sexual Responsibility Week

healthy and loving lives with sexual souvenirs. While STIs like HPV and herpes can't be cured, they can be managed.

Another huge problem is that some STIs do not show symptoms or do not show up in tests. Unless a man shows

symptoms of HPV, it's not possible to know if he has it. Chlamydia can have no symptoms in 50 to 75 percent of cases, although it can show up in tests. If gone untreated, it can lead to pelvic inflammatory disease, which can lead to sterility. Herpes is another one that is hard to see—especially during viral shedding prior to an outbreak. Some people will go years without knowing they have herpes. As for HPV, college-age people are the most at-risk group, especially women. So if you are sexually active, get tested and screened at your campus health center at least once a year. You might also want to look into the HPV vaccine (HPV can be a precursor to cervical cancer). Most campuses offer testing (including Pap smears—for women, not men) that are low-cost (a great holiday gift). If your health center doesn't have screening on campus, the staff can direct you to another center off campus. There are home kits available to test for HIV, herpes, HPV, chlamydia, gonorrhea, trichomoniasis, and hepatitis.

The following is a list of sexually transmitted infections available on your college campus (and yes, quantities are unlimited). Should you find yourself with a sore, an itch, or a bump that can't be explained, the following can help point you in the right direction—the direction of the health center.

A Guide to the Most Common STIs You Might Meet in College

Source: www.CDC.gov

Genital Herpes

According to the Centers for Disease Control and Prevention, one of every six teenagers and adults in the United States is infected with genital herpes. Women are more commonly infected than men, and it is estimated that one in every four women has herpes. The incurable viral herpes infections are caused by herpes simplex virus (HSV).

The major symptoms of herpes infection are painful blisters or open sores in the genital area. These may be preceded by a tingling or burning sensation in the legs, buttocks, or genital region. The herpes sores usually disappear within two to three weeks, but the virus remains in the body for life and the lesions may recur from time to time. Severe or frequently recurrent genital herpes is treated with one of several antiviral drugs that are available by prescription. These drugs help control the symptoms but do not eliminate the herpes virus from the body. Suppressive antiviral therapy can be used to prevent occurrences and perhaps transmission. Women who have genital herpes during pregnancy can transmit the virus to their babies. Untreated HSV infection in newborns can result in mental retardation and death. It is possible that a person may not experience a "first episode" until years after the infection is acquired. Condoms can help prevent infection, but can't eliminate the risk. Once infected, the virus is always present.

Genital HPV Infection

About 79 million Americans are currently infected with HPV. About 14 million people become newly infected each year. HPV is so common that most sexually active men and women will get at least one type of HPV at some point in

their lives. Some of these viruses are called highrisk types, and may cause abnormal Pap smears (for women). They may also lead to cancer of the cervix, vulva, anus, or penis.

"A buddy at another college got diagnosed with chlamydia. He didn't know it, but his girlfriend got diagnosed. They gave him some horse pills just to be safe."

> —iunior. Western New England University

Genital warts (also called venereal warts or condylomata acuminata) are caused by human papilloma

Look Up, Look Down, STDs Are on the Rise!

- Chlamydia: 6 percent increase in reported cases since 2014 (most reported cases ever)
- Gonnorhea: 13 percent increase in cases reported since 2014
- Syphilis (primary and secondary) 19 percent increase since 2014

Source: http://www.cdc.gov /nchhstp/newsroom/docs /factsheets/std-trends-508.pdf

virus, a virus related to the virus that causes common skin warts. Genital warts usually first appear as small, hard painless bumps in the vaginal area, on the penis, or around the anus. If untreated, they may grow and develop a fleshy, cauliflower-like appearance. In addition to genital warts, certain high-risk types of HPV cause cervical cancer and other genital cancers. Genital warts are treated with a topical drug (applied to the skin), by freezing, or if they recur, with injections of a type of interferon. If the warts are very large, they can be removed by surgery.

Chlamydial Infection

This infection is now the most common of all bacterial STIs. Chlamydia can be transmitted during vaginal, anal, or oral sex. It's often referred to as a "silent" STI because symptoms can be mild or absent. In both men and women, chlamydia may cause an abnormal genital discharge and burning with urination. In 2015, 1,526,658 cases of chlamydia were reported to the CDC from 50 states and the District of Columbia. This is a 6 percent increase since 2014. A large number of cases are not reported because most people with chlamydia are asymptomatic and do not seek testing. In women, untreated chlamydia may lead to pelvic inflammatory disease (PID), one of the most common causes of ectopic pregnancy and infertility in women. Many people with chlamydia, however, have few or no symptoms of infection. Sexually active females 25 years old and younger need testing every year. Chlamydia can be easily treated and cured with antibiotics. A single dose of azithromycin or a week of doxycycline (twice daily) are the most commonly used treatments.

HIV Infection and AIDS

HIV is the human immunodeficiency virus. It is the virus that can lead to acquired immune deficiency syndrome, or AIDS. In 2014, an estimated 44,073 people were diagnosed with HIV. The annual number of new diagnoses declined by 19 percent from 2005 to 2014. AIDS was first reported in the United States in 1981. The HIV virus destroys the body's ability to fight off infection. People who have AIDS are very susceptible to many life-threatening diseases, called opportunistic infections, and to certain

Condom Fun Facts

Most condoms are made from latex rubber. Others are made from lamb intestines and are often called lambskins. Some condoms are made from polyurethane. If you aren't allergic to latex, you should use latex condoms because they are best at preventing pregnancy, and they also protect best against AIDS, herpes, and other sexually transmitted diseases (STDs). Condoms shouldn't be used with Vaseline or other brands of petroleum jelly, lotions, or oils. But they can be used with lubricants that don't have oil, such as K-Y Jelly.

The Baaad News about Lambskin

Lambskin (or natural membrane) condoms, while effective for contraception, should not be used for disease protection because the naturally occurring pores in lambskin are large enough to allow some viruses to pass through.

-FDA

forms of cancer. Transmission of the virus primarily occurs during unprotected sexual activity and by sharing needles used to inject intravenous drugs. Having multiple sex partners or the presence of other sexually transmitted diseases can increase the risk of infection during sex. Unprotected oral sex can also be a risk for HIV transmission, but it is a much lower risk than vaginal or anal sex. If you have any questions about HIV infection or AIDS, you can call the AIDS Hotline confidential toll-free number: 1-800-342-AIDS.

Gonorrhea

The CDC estimates that, annually, 820,000 people in the United States get new gonorrheal infections, and less than half of these infections are detected and reported to the CDC. The CDC estimates that 570,000 of them were among young people 15–24 years of age. In 2015, 395,216 cases of gonorrhea were reported to CDC. The

most common symptoms of gonorrhea are a discharge from the vagina or penis and painful or difficult urination.

The most common and serious complications occur in women, and, as with chlamydial infection, these complications include PID, ectopic pregnancy, and infertility. Historically, penicillin has been used to treat gonorrhea, but in the last decade four types of antibiotic-resistant strains have emerged. New antibiotics or combinations of drugs must be used to treat these resistant strains.

Syphilis

During 2015, there were 23,872 reported new cases of syphilis. This is a 19 percent increase since 2014. The first symptoms of syphilis may go undetected because they are very mild and disappear spontaneously. The initial symptom is a chancre; it is a painless open sore that usually appears on the penis or around or in the vagina. It can also occur near the mouth, anus, or on the hands. If untreated, syphilis may go on to more advanced stages, including a transient rash and, eventually, serious involvement of the heart and central nervous system. The full course of the disease can take years. Penicillin remains the most effective drug to treat people with syphilis.

Other STDs/STIs

Other diseases that may be sexually transmitted include trichomoniasis, bacterial vaginosis, cytomegalo-virus infections, scabies, and pubic lice. STDs/STIs in pregnant women are associated with a number of adverse outcomes, including spontaneous abortion and infection in the newborn. Low birth weight and prematurity appear to be associated with STDs/STIs, including chlamydial infection and trichomoniasis. Congenital or perinatal infection

(infection that occurs around the time of birth) occurs in 30 to 70 percent of infants born to infected mothers, and complications may include pneumonia, eye infections, and permanent neurological damage.

Bottom Line

If you want to find a sexually transmitted disease, college is the most convenient place in the world to get what you want. Get tested before getting into bed. With the new HIV tests, all it takes is a mouth swab—no needles. Make it a rule—no test, no getting naked.

Tip #71 The U of Birth Control

The Tip

Free condoms are all over the place. Never pay for a condom again.

The Story

I can't remember the last time I paid for a condom. I get my condoms all over campus. The people in the health office are great. They have a wide selection. I've also picked up free condoms at campus health fairs. They are

"I overheard my dad tell my brother, 'Don't be a fool—wrap your tool!"" —senior, Alfred College all shapes, sizes, and flavors. I've even grabbed some glow-in-the-dark ones. It's better than a

store. Stock up on free condoms. Buying them can run you about ten bucks a pack or more. I'm a poor college student. Stock up. If you don't see them in the health center, ask. They're available. I went to a party at my friend's school and a guy dressed up as a condom man was walking around the bar handing out free condoms. I never leave home without one. If you don't use a condom, you're just dumb. There's no reason not to.

—junior, Western Kentucky University

* * *

Some people graduate with honors, some with a new job, and some with a new child. Few people expect to leave with a new member of the family—but it happens. If this isn't your plan, then plan accordingly when you're having sex.

Birth Control in College

There couldn't be an easier place or time to find birth control. Most college campuses offer many accessible and affordable birth control options. This includes both prescription and over-the-counter choices through the health center. In addition, such services as pelvic exams, Pap smears, STD/STI testing, and counseling are also available. If your campus health center doesn't offer these services or cannot prescribe birth control, they can typically offer you a referral to resources off campus. If they won't offer you a referral, talk to your family physician, visit a local Planned Parenthood office, or look up "family planning" in your local phone book. To help in your birth control education, I've listed the following birth control options from the FDA's website (visit www.FDA.gov/ForConsumers/ByAudience/ForWomen

for more information on birth control). The first one (no sex) is my addition to their list. Here's the list:

No Sex

What is it? No vaginal intercourse. How do I use it? Keep your pants on.

Possibility of getting pregnant? 0 out of 100 women report getting pregnant when avoiding sex (but there can be immaculate circumstances).

Some risks: You will get to know your sexual partner very well before having sex.

Does it protect me from sexually transmitted infections (STIs)? 100 percent (this includes no oral or anal sex).

Birth Control Fun Facts

Scary Thought:

30.8 percent of females and 27.6 percent of males reported using withdrawal as their birth control method.

A Less Scary Thought:

About half of students are using two methods of birth control. Approximately 46 percent of women and 51 percent of males reported using a male condom plus another method of birth control.

-ACHA-NCHA-II Executive Summary Spring 2016

Male Condom, Latex/ Polyurethane

What is it? A thin film sheath placed over the erect penis to stop sperm from reaching the egg.

How do I use it? Put it on immediately before intercourse. Use only once and then discard. Pull out before the penis softens, and hold the condom against the base of the penis before you pull out.

How do I get it? You can buy it over the counter.

Possibility of getting pregnant? Out of 100 women who use this method for one year, 11-16 may get pregnant. The most important thing is that you use a condom every time you have sex.

Some risks: Irritation and allergic reactions. Polyurethane condoms are available for those with latex sensitivity.

Does it protect me from STIs? Except for abstinence, latex condoms are the best protection against HIV/AIDS and other sexually transmitted diseases. Condoms are the only contraceptive product that may protect against most STIs. Note: Condoms made from lambskin are available for those with latex sensitivity, but latex condoms are best at preventing pregnancy and protecting against STIs.

Female Condom

What is it? A lubricated, thin polyurethane pouch that is put into the vagina.

How do I use it? Put the female condom into the vagina right before sex. Use it only once and then throw it away. You need a new female condom each time you have sex.

How do I get it? You do not need a prescription. You can buy it over the counter.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 20 may get pregnant.

Some risks: Irritation, allergic reactions.

Does it protect me from STIs? May give some protection against STIs. Not as effective as latex condoms. More research into its effectiveness is needed.

Diaphragm with Spermicide

What is it? A dome-shaped flexible disk with a flexible rim made from latex rubber or silicone. It covers the cervix so that sperm cannot reach the egg.

How do I use it? Put spermicidal jelly on the inside of the diaphragm before putting it into the vagina. Put the diaphragm into the vagina before having sex. You must leave the diaphragm in place for at least 6 hours after having sex. It can be left in place for up to 24 hours. You need to use more spermicide every time you have sex.

How do I get it? You need a prescription. A doctor or nurse will need to do an exam to find the right size diaphragm for you. You should have the diaphragm checked after childbirth or if you lose more than 15 pounds; you might need a different size.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 15 may get pregnant.

Some risks: Irritation, allergic reactions, and urinary tract infection. If you keep it in place longer than 24 hours, there is a risk of toxic shock syndrome. Toxic shock is a rare but serious infection

Does it protect me from STIs? No.

Sponge with Spermicide

What is it? A disk-shaped polyurethane device with the spermicide nonoxynol-9.

How do I use it? Put it into the vagina before you have sex. Protects for up to 24 hours. You do not need to use more spermicide each time you have sex.

You must leave the sponge in place for at least 6 hours after having sex. You must take the sponge out within 30 hours after you put it in. Throw it away after you use it.

How do I get it? You do not need a prescription. You can buy it over the counter.

Possibility of getting pregnant? Out of 100 women who use this method for one year, 16–32 may get pregnant. It may not work as well for women who have given birth. Childbirth stretches the vagina and cervix and the

sponge may not fit as well.

Some risks: Irritation and allergic reactions. Some women may have a hard time taking the sponge out. If you keep it in place longer than 24–30 hours, there is a risk of toxic shock syndrome. Toxic shock is a rare but serious infection. Does it protect me from STIs?

Want to Get Tested Right Now (or in a few minutes)?

Contact your campus health center. Visit www .PlannedParenthood.org and search for a local health center. Visit: www.STDTest Express.com and speak to a live consultant to help answer your questions and help you find a place to get tested.

Cervical Cap with Spermicide

No.

What is it? A soft latex or silicone cup with a round rim, which fits snugly around the cervix. It covers the cervix so that sperm cannot reach the egg.

How do I use it? Put spermicidal jelly inside the cap before you use it. Put the cap in the vagina before you have sex. You may find it hard to put in. You must leave the cap in place for at least 6 hours after having sex. You may leave the cap in for up to 48 hours. You do not need to use more spermicide each time you have sex.

How do I get it? You need a prescription.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 17–23 may get pregnant. It may not work as well for women who have given birth. Childbirth stretches the vagina and cervix and the cap may not fit as well.

Some risks: Irritation, allergic reactions, and abnormal Pap smears. If you keep it in place longer than 48 hours, there is a risk of toxic shock syndrome. Toxic shock is a rare but serious infection.

Does it protect me from STIs? No.

Spermicide Alone

What is it? A foam, cream, jelly, film, or tablet that kills sperm.

How do I use it? Instructions can be different for each type of spermicide. Read the label before you use it. You need to put spermicide into the vagina between 5 and 90 minutes before you have sex. You usually need to leave it in place at least 6 to 8 hours after; do not douche or rinse the vagina for at least 6 hours after sex.

How do I get it? You do not need a prescription. You can buy it over the counter.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 30 may get pregnant. Different studies show different rates of effectiveness.

Some risks: Irritation, allergic reactions, and urinary tract infections. If you are also using a medicine for a vaginal yeast infection, the spermicide might not work as well. Does it protect me from STIs? No.

Oral Contraceptives—Combined Pill ("The Pill") What is it? A pill that uses hormones (estrogen and progestin) to stop the ovaries from releasing eggs in most women. It also thickens the cervical mucus, which keeps the sperm from joining with the egg.

How do I use it? You should swallow the pill at the same time every day, whether or not you have sex.

How do I get it? You need a prescription.

possibility of getting pregnant? Out of 100 women who use this method for one year, about 5 may get pregnant.

Some risks: Dizziness, nausea, changes in your menstrual cycle, changes in mood, and weight gain. It is not common, but some women who take the pill develop high blood pressure. It is rare, but some women will have blood clots, heart attacks, or strokes.

Does it protect me from STIs? No.

Oral Contraceptives—Progestin-Only ("The Pill") What is it? A pill that has only the hormone progestin. It thickens the cervical mucus, which keeps sperm from joining with an egg. Less

often, it stops the ovaries from releasing eggs.

How do I use it? You should swallow the pill at the same time every day, whether or not you have sex.

How do I get it? You need a prescription.

"I get my pills at the health center. My doctor at home gave me a prescription and I fill it at school, but my friend got examined by the nurse and then got her prescription. It's so inexpensive too. If your college doesn't offer them (some don't), then you can try a local clinic. My friend goes to Planned Parenthood."

—junior, Northwestern University

Possibility of getting pregnant? Out of 100 women who

use this method for one year, about 5 may get

pregnant.

some risks: Irregular bleeding, weight gain, and breast tenderness. Less protection against ectopic pregnancy (pregnancy in the fallopian tubes) than the combined pill.

Does it protect me from STIs? No.

Oral Contraceptives—Extended/Continuous Use ("The Pill")

What is it? A pill that uses hormones (estrogen and progestin) to stop the ovaries from releasing eggs in most women. It also thickens the cervical mucus, which keeps the sperm from joining with the egg. These pills are designed so women have fewer or no periods.

How do I use it? You should swallow the pill at the same time every day, whether or not you have sex.

How do I get it? You need a prescription.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 5 may get pregnant.

Some risks: Risks are similar to other oral contraceptives. You may have fewer planned periods. If you miss a scheduled period, you may be pregnant. You will likely have more bleeding and spotting between periods than with other oral contraceptives.

Does it protect me from STIs? No.

Patch

What is it? A skin patch you can wear on the lower abdomen, buttocks, or upper body. It uses hormones (estrogen and progestin) to stop the ovaries from releasing eggs in most women. It also thickens the cervical mucus, which keeps the sperm from joining with the egg.

How do I use it? You put on a new patch and take off the old patch once a week for 3 weeks. During the fourth week, you do not wear a patch and you have a menstrual period. How do I get it? You need a prescription.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 5 may get pregnant. The patch may be less effective for women who weigh more than 198 pounds.

Some risks: It will expose you to higher than average levels of estrogen than most oral contraceptives do. It is not known if serious risks, such as blood clots, are greater with the skin patch because of greater exposure to estrogen.

Does it protect me from STIs? No.

Vaginal Contraceptive Ring

What is it? A flexible ring that is about 2 inches around. You put it into the vagina and it releases hormones (progestin and estrogen) to stop the ovaries from releasing eggs in most women. It also thickens the cervical mucus, which keeps the sperm from joining with the egg.

How do I use it? You put the ring into the vagina yourself. You need to keep the ring in your vagina for 3 weeks, then take it out for 1 week. If the ring falls out and stays out for more than 3 hours, you need to use another kind of birth control method until the ring has been used for 7 days in a row.

How do I get it? You need a prescription.

Possibility of getting pregnant? Out of 100 women who use this method for one year, about 5 may get pregnant.

Some risks: Vaginal discharge, swelling of the vagina, and irritation. Other risks are similar to oral contraceptives (combined pill).

Does it protect me from STIs? No.

Shot/Injection

What is it? A shot of the hormone progestin that stops the ovaries from releasing eggs in most women. It also thickens the cervical mucus, which keeps the sperm from joining with the egg.

How do I use it? You need one shot every 3 months.

How do I get it? You need a prescription.

Possibility of getting pregnant? Out of 100 women who use this method for one year, less than 1 may get pregnant.

Some risks: You may have bone loss if you get the shot for more than 2 years. Bleeding between periods, weight gain, breast tenderness, and headaches.

Does it protect me from STIs? No.

IUD—Intrauterine Device

What is it? A T-shaped device that is put into the uterus by a healthcare provider.

How do I use it? After a doctor or other healthcare provider puts in the IUD, it can stay in place for 5 to 10 years, depending on the type.

How do I get it? You need a prescription.

Possibility of getting pregnant? Out of 100 women who use this method for one year, less than 1 may get pregnant.

Some risks: Cramps, bleeding, pelvic inflammatory disease, infertility, and tear or hole in the uterus.

Does it protect me from STIs? No.

Implantable Rod

What is it? A thin, matchstick-sized rod that contains the hormone progestin. It thickens the cervical mucus, which keeps sperm from joining with the egg. Less often, it stops the ovaries from releasing eggs.

How do I use it? It is put under the skin on the inside of your upper arm. It lasts up to 3 years.

How do I get it? A doctor or nurse puts it under the skin of your arm. You will get a shot in the upper arm to make the skin numb, then the rod is placed just under the skin with a needle.

Possibility of getting pregnant? Out of 100 women who use this method for more than one year, less than 1 may get pregnant. It might not work as well for overweight or obese women. It might not work as well if you are taking certain medicines for things like tuberculosis (TB), seizures, depression, or HIV/AIDS. Tell your doctor if you are taking the herb St. John's Wort.

Some risks: Acne, weight gain, cysts of the ovaries, mood changes, depression, hair loss, headache, upset stomach, dizziness, lower interest in sexual activity, sore breasts, and changes in your periods.

Does it protect me from STIs? No.

Post-Coital Contraceptives ("Plan B"/"The Morning-After Pill")

What is it? A pill with hormones (either progestin alone or progestin plus estrogen) that is similar to other oral contraceptives. It stops the ovaries from releasing an egg or stops sperm from joining with the egg.

How do I use it? You can use it after you have unprotected

sex (did not use birth control). You can also use it if your birth control did not work (i.e., the condom broke). You must swallow the pill within 72 hours of having unprotected sex. For the best chance for it to work, you should take the pill as soon as possible after unprotected sex.

How do I get it? You can buy it over the counter if you are 18 years or older. If you are younger than 18, you need a prescription.

Possibility of getting pregnant? This method reduces the risk of pregnancy resulting from a single act of unprotected sex by almost 85 percent if you take it within 72 hours.

Some risks: Nausea, vomiting, abdominal pain, fatigue, and headache.

Does it protect me from STIs? No.

Consult your doctor for additional birth control options.

Bottom Line

If you're sexually active and not looking to start a family, stay in control of your birth control. Otherwise, you might end up with a child, or two, or three. And there's not a lot of space in dorm rooms for cribs.

Tip #72 Possibly Pregnant

The Tip

If you think you might be pregnant, get help immediately.

The Story

It was January of my junior year; I had just come off the pill in December. I was gaining too much weight from it. I was on my last pack. I didn't quite know when my cycle was because I had been on the pill for years. I was with my boyfriend one night. We were doing what we do. It ends up, the condom slipped off, but we didn't realize that until it was all over. When my boyfriend was looking for the condom after we finished, he couldn't find it anywhere. That freaked the hell out of us. We were looking everywhere. When I went to urinate the next day, I found it. It had slipped off and was inside of me. That next morning, I called my aunt who is a nurse. She has dealt with this sort of thing before. She guided me to seek help. I took a couple of pills that were prescribed for me. I told my boyfriend what happened. He was supportive. The next week was nerve-racking. I wasn't sure if it worked. I had some cramping and wasn't feeling so great, but I didn't get pregnant. Every time after that, we checked to make sure that the condom was still on. And we're still checking to this day! I don't want to be that 10 percent...

—junior, Florida International University

* * *

A condom breaks, a pill is forgotten, a drunken night ends and you realize, um, yeah, okay, we've got a big problem... If you think that you're pregnant, don't just sit there and panic. Contact your health center, doctor, or family physician and pick up an over-the-counter pregnancy test. If it's been within 120 hours of unprotected intercourse, ask your doctor or emergency room about emergency contraception.

Help is all around you. Here is some helpful information on emergency contraception, or emergency bind

• Emergency contraception, or emergency birth control, is used to keep a woman from getting pregnant when she has had unprotected vaginal intercourse. "Unprotected" can mean that no method of birth control was used. It can also mean that a birth con-

trol method was used but did not work—like a condom breaking. Other things can

"The condom broke and it was too late.
The next morning we went to the health center and she took the morning after pill. The next few days were horrible."
—senior, Indiana University

happen as well that put a woman at risk for getting pregnant. A woman may have forgotten to take her birth control pills. Emergency contraception should never be used as a regular method of birth control.

 Emergency contraception keeps a woman from getting pregnant by stopping ovulation (stopping the ovaries from releasing eggs that can be fertilized), fertilization (stopping the egg from being fertilized by the sperm),

Scary Sex Fact

16.4 percent of sexually active college students reported that they or their partner used emergency contraception (the "morning-after pill") within the last twelve months.

—ACHA-NCHA-II Executive Summary Spring 2016

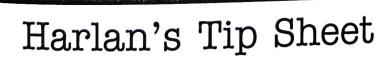
- or implantation (stopping a fertilized egg from attaching itself to the wall of the uterus).
- There are two types of emergency contraception available to women in the United States: emergency contraceptive pills (ECPs), and intrauterine devices (IUDs). In most states, you need to see a healthcare provider to get either type of emergency

contraception. The healthcare provider may take your medical history and do a urine pregnancy test, and will talk with you about which type of emergency contraception is best for you. You should never take ECPs that belong to another family member or friend. It is very important to first talk with a healthcare provider.

If the scare is real, and you're pregnant, don't rush any decisions. Some people have babies while in college, some choose not to. Talk to all the people around you. Make sure that you have a strong support system and people you trust and love in your corner. Talk to your parents (if possible), someone in the counseling office, a sibling, an extremely trusted friend, a spiritual leader, a therapist, or a family planning counselor. Then move forward. And if you're a woman reading this tip, contact the dad. He's part of this too.

Bottom Line

If you have a pregnancy scare, don't freak out. Get help (then freak out).



Naked People, Places, and Resources

Campus Health Center

• Doctors are standing (and sitting) by. Most college

health services offer free or extremely inexpensive screenings for sexually transmitted diseases, contraceptive consultation, and pregnancy counseling—start at your health center and counseling center. The people on campus will be able to direct you to local resources.

National Resources

• The American Sexual Health Association 1-919-361-8400 (9 a.m. to 7 p.m. Eastern Time, Monday through Friday)

Website: www.ASHASTD.org/STD-STI/Herpes.html

- National STD and AIDS Hotline
 1-800-227-8922 or 1-800-342-2437 (twenty-four hours a day, seven days a week)
- National Institute of Allergy and Infectious Diseases
 Website: www.NIAID.NIH.gov
 Twitter: www.Twitter.com/NIAIDNews
- U.S. National Library of Medicine—MEDLINEplus 1-800-338-7657

Website: www.MEDLINEplus.gov
Twitter: www.Twitter.com/MEDLINEplus4You

 Centers for Disease Control and Prevention 1-888-232-3228

Website: www.CDC.gov

Facebook: www.Facebook.com/CDC Twitter: www.Twitter.com/CDCgov

Guttmacher Institute
 Website: www.Guttmacher.org
 Facebook: www.Facebook.com/Guttmacher
 Twitter: www.Twitter.com/Guttmacher

• The American Congress of Obstetricians and Gynecologists 1-202-863-2518

Website: www.ACOG.org

• The Office on Women's Health (OWH) 1-800-994-WOMAN (1-800-994-9662)

Website: www.WomensHealth.gov

Facebook: www.Facebook.com/HHSOWH Twitter: www.Twitter.com/WomensHealth

• Emergency Contraception Hotline

1-888-668-2528

Website: EC.Princeton.edu

• Planned Parenthood Federation of America 1-800-230-7526, 1-800-669-0156 (to order materials)

Website: www.PlannedParenthood.org

• Sex Addicts Anonymous:

Website: www.SAA-Recovery.org

• The Naked Roommate

Website: www.NakedRoommate.com

Facebook: www.Facebook.com/NakedRoommate

Twitter: www.Twitter.com/NakedRoommate

Help Me, Harlan!

Website: www.HelpMeHarlan.com

Facebook: www.Facebook.com/HelpMeHarlan

Twitter: www.Twitter.com/HarlanCohen

Want to Get Tested?

- Contact your campus health center
- Contact your local hospital or caregiver
- Ask the pharmacist at your local drug store for overthe-counter options

• Visit: www.PlannedParenthood.org

• Visit: www.STDTestExpress.com