



PlayFair

Mother Superior's

Guide to

Safer Sex



Presented by

the Sisters

of Perpetual Indulgence



GUILT AND STIGMA SUCK (AND NOT IN A GOOD WAY)!

Don't let guilt and stigma ruin your sex life or your health. Inform yourself about issues regarding sex and your health, and then you can make better decisions for you and your partners when you do have sex, and you'll find the guilt and shame will be stripped away leaving you free to have a fun sex life for years to come. With a dash of self care and equal parts concern for your partners and a festive attitude, sex can give you the pleasure it's meant to - without putting you or your partners in harm's way.

Remember, this information is not meant to be a substitute for your doctor or other professional medical advice. Play Fair! is intended to give you the basics and encourage you to get informed, have fun, and lose the guilt, buddy!

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So follow the advice our Mother Superior often doles out to anyone in earshot, "Go forth and sin some more!" and, "Please, Play Fair!"

MOTHER SUPERIOR'S INSTRUCTIONS AND TIPS FOR SELF CARE

Several months ago, Mother Superior noticed a lot of sniffing, coughing, grimacing, twitching, scratching, and farting around the convent. Several of the Sisters were complaining about itchy pussies, burning buttholes, sore balls, swollen glands, drippy discharges, scratchy throats, rashes, cramps, lumps, and tingling between their legs (and not the good kind of tingle). When Mother Superior found a crab walking up her leg, she decided to get to the bottom of all these ills. It seems these Sisters were suffering from numerous Sexually Transmitted Diseases (STDs) and thought perhaps folks outside the convent could benefit from some saintly suggestions. We give these diseases to ourselves and others; and we can do something to stop them in their tracks. Self care and care for others is the purpose of this pamphlet. If we make an effort towards self care, we will all be better off when getting off.

Let's always Play Fair! Cum clean! If you even think that you may have a Sexually Transmitted Disease, please con-

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sider getting checked out before putting others at risk. Be sure you do what you can to protect yourself and others. After all, we're very special people!

Soap & Water

Wash your fruit before you eat it. Cleaning up afterwards or between partners is a good idea too. Remember, cleanliness is next to ... well, you know.

The After-Sex Piss

Be a whiz kid! Pee as soon as you can after having sex - the sooner the better.

The Old Douche:

To douche or not to douche, that is the question. Douching can cause a lot of problems, and it isn't recommended; but if you do douche, it's best to use water, not harsh chemicals.

Lubricants

Water- or silicone-based lubes are the bomb. Oil-based lubes (including baby oil and Crisco) are only good for jacking and jilling off, cooking, and the occasional wrestling match.



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Oils will break down the surface of latex condoms, reducing their effectiveness. Remember that there is no such thing as too much lube. Be wary of chemicals and fragrances, MSG, hot sauce, and the like. These can irritate sensitive tissues around your ass, pussy, cock or mouth. Experiment with lubes to find one that works for you. Mother Superior's motto: Wrapped or bare, remember lube to reduce wear and tear.

Cock Rings

Take off your ring (no, not your wedding ring, dear when you are not using it. I can cut off the circulation to the family jewels causing them to swell and ache. Big jewels are lovely, but not in this case. Not to mention the fact that these metal rings can set off metal detectors! Hard plastic rings can be just as bothersome. We suggest you use the soft, silicone jelly type cock rings or the adjustable leather snap cock



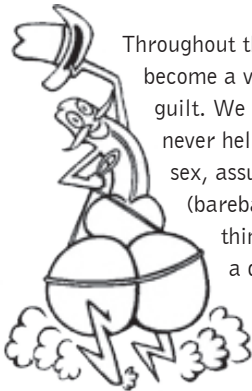
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straps, which can be unsnapped and removed immediately – in a snap. We give them three snaps up. Too much?!

Condoms/Barriers

Wrap it up! Condoms and other barriers are the best way to prevent the spread of some diseases, especially the nasty ones. A good rule of thumb is no fucking without a condom. Plastic wrap is a cheap and inexpensive alternative to dental dams and other costly barriers. Just be careful about the kind of wrap: The microwavable kind is only good for cooking your meat, not protecting it from STDs. Also, remember that condoms come in lots of varieties these days (latex, polyurethane, ribbed, studded, etc). There is even the new and improved female condom suitable for anyone with a hole to fill. Try out a wide variety to find the one that works best for you.

Barebacking



Throughout the years, “barebacking” has become a very charged term, loaded with guilt. We believe that guilt and shame are never helpful. When having unprotected sex, assume everyone is possibly positive (barebacking can expose you to other things besides HIV). If it walks like a duck and quacks like a duck ... it might really be the Easter Bunny. Assuming that your

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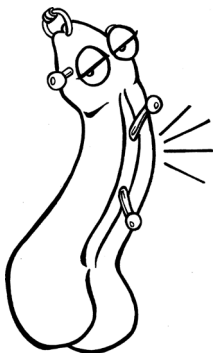
play partner is coming from the same space as you is one of the few risks Mother Superior discourages. Better to assume your partner has no idea what's inside his or her body. We suggest that folks assume everyone is possibly positive and Play Fair from there.

Rimming:

“Lick it before you stick it” is the mantra of many. However, eating ass can be a risky sexual behavior. Sure, it's fun, festive and feels oh-so-fabulous, but the parasites you may ingest can be problematic. Here's the bottom line: even the cleanest looking, most desirable ass can have tiny poo-particles full of germs. If you rim, thorough washing does help, but a latex barrier makes for a more effective risk-reduction strategy.

Piercings

Keep `em clean. Let the holes heal before you play with them and, if start getting irritated, stop playing with them. For the best information, check with your local professional piercer.



TESTING, TALKING, TAKING CARE



Life is dangerous. And love can be even more hazardous. But if you've made the decision to be sexual, you've made a decision to allow a bit of risk in your life (if life is the soup, risk is the spice). That's where the notion of "risk management" comes into play. No, we're not suggesting you insure your family jewels with Lloyds of

London. But we do encourage you to think about what kinds of risk you are comfortable in taking, and learn about the wide range of steps you can take to lower your risk for HIV, STDs, and bullshit guilt, shame, and fear that sometimes come pre-packaged with sex in our society. Safer sex is not a one size fits all deal. Nor is it an all or nothing proposition. Anything we do that moves our sexual practices in the direction of taking care of ourselves and our partners is a positive stride that should be commended!

We all know it's not polite to speak when you have something in your mouth, so you may want to plan in advance

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what you would say to Stranger Steve or Mysterious Mary when you find yourself in an intimate situation and need to address certain issues pro-actively. About what? It helps to know your own limits and those of your partner (reading below will help you find them) and being able to tell folks what makes you comfortable, and what does not.

Here in the convent, we believe the more we know about our individual health, the better able we are to take care of ourselves and our partners. We encourage sexually active folks to get tested regularly, not just for HIV but for STDs as well. Every three to six months is a good benchmark for the horny homo or hetero on the go. But testing is only part of the equation. It's also important to talk about testing, HIV/STD status, what level of risk you're comfortable with, and risk reduction measures you use to keep yourself safe and sane both "in the moment" and in the clear (if sometimes overly bright) light of the morning after.

And remember, this "disclosure" thing is a two way street. Just as it's important to Play Fair by telling folks if you think have some kind of critter crisis in your nether regions, it's also important to Play Fair when hearing someone may have inadvertently exposed you to some kind of STD. Remember that making difficult disclosures like that demonstrates that they care enough about your health to step out of their comfort zone to make sure you

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can get the screening you need. Be gracious, thank them for their honesty, and remember someday the shoe (or high heel) may be on the other foot. Pay it forward, and Play Fair.

Alcohol/Drugs



We are not ones to discourage a smart cocktail (or two or three) once in awhile. Just be aware that when you are intoxicated or high, you sometimes forget to take care of yourself. It is wise to not mix sex with too much alcohol or drugs:

you could wake up with more than just a bad date.

Nutrition/Vitamins

Unlike Sister Ana Rexorea whose Last Supper consisted of half a Tic Tac and a diet Coke in 1977, Mother Superior (like every good mother) recommends good balanced meals. Since it's not always easy to eat right, try to avoid fast foods and take your Flintstones! A daily vitamin and good eating habits help your body recover from all the fun you have.

Poppers

They slow down time ... and increase your heart rate. When combined with blood pressure meds or boner

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booster pills, you might as well have EMTs standing by before your date starts. If you are gonna use poppers, avoid smoking around an open bottle, clean up spills with cold water, and sip cold water or milk if swallowed. Best to avoid the liquid and put a cotton ball soaked but not dripping in the bottle instead.

Observation

Look before you lick. Check out your partners before you lay hands on them. Feeling someone up and scoping them out takes on new meanings when you are caring for yourself. Some Sisters carry little flashlights for those dark and mysterious encounters. Trust your instincts. If you get a sense it isn't safe or that something is amiss, it probably is. Instincts are seldom wrong.

Blow Jobs R Us

When giving beejays, spit or swallow, but don't gargle. And don't forget the courtesy gag.

STD Testing

If you suspect you or one of your partners might have a bug or two (or more), it is good to get tested. Since most of these diseases can be contracted without any symptoms, every sexually active person should get tested regularly for all STDs. A good guideline is every three months for most STDs and every six months for HIV.

THE ABC'S OF STD'S

STD stands for "Sexually Transmitted Disease." These are all infections caused by bacteria, viruses or parasites that can be passed from person to person in the course of getting off. For the STDs listed below, we've listed where the symptoms appear, what they are, how you can catch the STD, what happens if you don't treat them, and how to get rid of them. If your symptoms are not appearing, it doesn't mean that you are not carrying. People don't always have symptoms. Be seen at a clinic regularly to get checked out. Self care is always the best solution. A stitch in time ... and all that jazz.

GnS

This is Guilt-n-Stigma. This is the deadliest of STDs. It hides in the deepest, darkest places in our hearts and minds. We often don't even know we have it. Affected Parts: Mind, Body, and Spirit; governs your very being - including self esteem, judgment, decision making skills, self-worth, autonomy, connection with community, and social behavior.



Signs & Symptoms: feeling bad, usually after a trip to the bars, baths, bushes, or tearooms, waking up in someone else's bed or watching porn (the acts are not bad, only the feelings); can cause low self esteem, excessive drug

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use, being mean and/or judgmental to friends, family, co-workers or total strangers.

Symptoms Appear: from two to three years of age, and in many cases persist throughout life. Avoid exposure to Someone Else's Family Values, strict religious doctrine, peer pressure, letting someone else decide what is good for you, and rightwing politicians.

Treatment: apply liberally respect and love for yourself, random acts of kindness, Your Own Family Values, a good giggle early and often, and lightening up on yourself.

Untreated: can result in loss of ability to be happy, loss of spontaneity, large therapy bills, loss of love, random acts of meanness, impotence, sexual dysfunction, excessive drug use, and epidemics of sexually transmitted diseases. Excellent

Risk Reduction Strategy: Perpetual Indulgence of self care and dissemination of universal joy.

Viral Vermin

Unlike bacteria, viruses are a special kind of super germ that can laugh in the face of the "kryptonite" of antibiotics. When you go viral, generally speaking, you've got it for life. Some of the viral vermin are more treatable, though, than others.

Hepatitis A, B, & C

It's not quite Baskin Robbins, but Hepatitis does come in several flavors. The most common variety you may encounter are Hepatitis A, B and C (HAV, HBV, HCV). Affected Parts: the liver. Signs & Symptoms: Feeling run down, yellowing of your eyes or skin, nausea, vomiting, mild aches or pain in the belly, dark urine, light colored shit. You could be asymptomatic (no signs or symptoms), so routine testing will help ensure your continued sexual health. HIV may make someone more susceptible to Hep C transmission.

Exposure: HAV: contaminated food, water or fecal matter (through eating ass or going down on an unclean dick or toy). HBV: contaminated blood (sharing works and sharing bodily fluids) - sex, baby! HCV: blood-to-blood contact; sharing contaminated toys or sharp objects. HCV is not just for injection drug users anymore; sex (primarily intensive anal play) is a potential source for exposure. Treatment: change in diet, lots of rest, and plenty of fluids (sorry honey, that's nonalcoholic); some medications are available. Some of us love dropping our drawers and getting a shot in the ass, but not everybody. Your doctor might vaccinate you for Hep.

HAV: nothing, really. Your body will clear it on its own in about six months.

HBV: many folks clear it on their own; but for some,

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antiretroviral medications may be needed (the same ones that treat HIV, so be sure to discuss everything with your doctor).

HCV: few people clear on their own. Until recently, treatment options have been limited, horrendous, and not very effective. But new research is coming up with more options. Still, it's wise to remember, HCV will fuck ... a gurl ... up! Know your limits!

Untreated: severe liver damage, death. A Risk Reduction Strategy: a small series of vaccinations for both Hep A and B (there is no vaccine for Hep C); barriers to prevent blood contact; clean needles or works. And by the way, unlike other illnesses, testing positive for HCV antibodies even if you cleared the virus from your system with treatment, doesn't mean you can't catch the virus again. Herpes Simplex (HSV1 and HSV2) HSV1 is primarily known to cause cold sores on the mouth, while HSV2 is primarily known to cause genital sores (although some of us may have managed to get this ass-backwards!).

Affected Parts: skin around the mouth, genitals or ass. Signs & Symptoms: painful sores or blisters on or around the mouth, cock, vulva, ass, groin or mouth; tingling, burning sensation prior to appearance of painful sores, sometimes accompanied by low grade fever, vaginal discharge, or swollen nodes in the groin. Groan! Appear four to fourteen days after contact. Sores go away and return occasionally. Recurring outbreaks, or shedding,

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may continue to be infectious towards others.

Exposure: contact with fluid from open sore; even a kiss can expose you; and the virus can be shed even if no sore is present. Treatment: no cure, but the sores can be treated with prescription medications. Untreated: genital infections can cause problems during pregnancy and be deadly to newborns. Open sores increase the body's chance of transmission of other STD's such as Hepatitis, syphilis or HIV.

Risk Reduction Strategy: condoms are as good as it gets, but not 100%.

HIV (and AIDS)

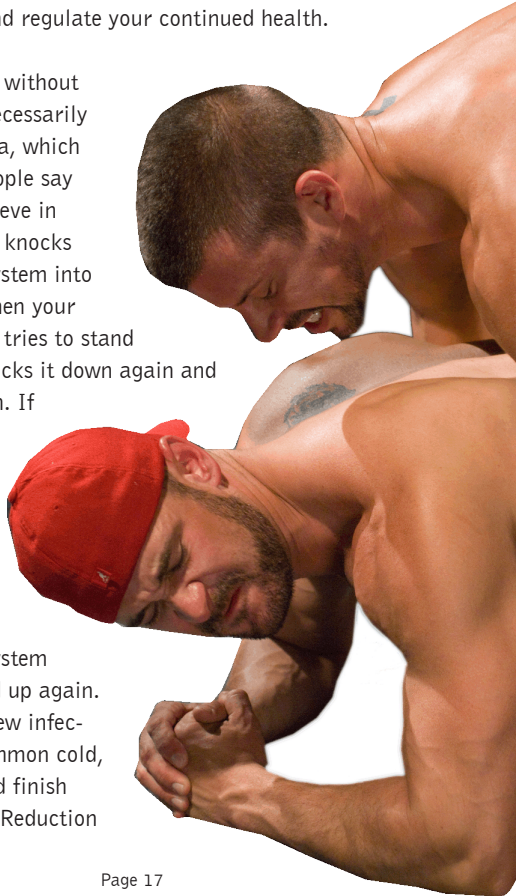
Affected Parts: white blood cells (the immune system's defensive attack force).

Initial Signs & Symptoms: initial exposure may feel like a prolonged moderate to severe flu, fever, nausea, night sweats, recurring diarrhea (however, rash and other odd symptoms can occur without the flu-like symptoms). Initial symptoms usually appear six weeks to six months after exposure. However, some people may not experience symptoms for years.

Exposure: bodily fluids from an HIV+ person: blood, cum (semen), pre-cum, vaginal fluid or breast milk.

Treatment: no longer the death sentence of yesteryear, but far from a walk in the park, HIV/AIDS is often treated as a severely chronic illness. There is no cure for the HIV infection, but there are lots of medications available to help monitor and regulate your continued health.

Untreated: HIV without meds doesn't necessarily end up killing ya, which is why some people say they "don't believe in HIV." HIV just knocks your immune system into the dirt, and when your immune system tries to stand up again, it knocks it down again and again and again. If left untreated, the amount of virus in your body will eventually increase to the point where your immune system will never stand up again. And then any new infection, even a common cold, can come in and finish you off. A Risk Reduction



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Strategy: recent exposure within 72 hours may warrant PEP (Post-Exposure Prophylaxis). PrEP (Pre-Exposure Prophylaxis), which is a combination of HIV medications and condom use, which also may reduce infections. If you or your honey are positive, starting HIV medications to reduce the amount of virus in the community may also help reduce infections. Preventative: barriers during sexual activity; clean needles/sharps; communication about testing, status, viral load counts; sero-sorting (only having sex with others of your same HIV status); sero-positioning (selecting partners based upon risk level: “I’ll only bottom with guys I know, but top when I’m with strangers”).

HPV (Venereal Warts, Precancerous Cells, Cancer)

This is one of the most catchable little buggers out there (upwards of 80% of sexually active folks have been exposed). There are a whole host of strains of this little vermin, some of which can be vaccinated against. Affected Parts: skin and soft tissue in and around the mouth, genitals, and ass.

Signs & Symptoms: small, cauliflower-like bumps (called warts) in or around your mouth, ass, vagina, or on your cock. Initial Appearance: within one week to four months after contact. Not everyone develops warts though. Some strains of HPV have been linked to funky precancerous cell growth that often has no symptoms. You may want

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to see health care providers and ask them to look in all those moist, dark openings of your body.

Exposure: through skin to skin contact. **Treatment:** no treatments are available for the virus. Removal of warts and funky cells (referred to as lesions) by topical medications, burning, freezing or surgical intervention may be an option. **Cancers** may require radiation, chemotherapy, and/or surgery. **Untreated:** low grade lesions may disappear as your body figures out how to fight the virus. However, high grade lesions can become dangerous, even leading to cancer. **A Risk Reduction Strategy:** there is no general test for men or women to check one's overall HPV status. Annual PAPs for women AND men (looking in both the coot and the boot) are good for detecting lesions in those hard to reach areas. Fortunately, a vaccine against the worst strains of HPV has been approved for young men and women up to the age of 26. Using the vaccine to help reduce the severity of HPV in already infected people is being looked at. Condoms help but are a Hail Mary Pass - a long shot with limited chance of successfully reaching the goal: eliminating skin to skin exposure - but may be worth the effort since some studies say it can reduce risk up to 70%.



HISTORY, SISTORY, AND CREDIT WHERE CREDIT IS DUE

Play Fair 2013 is a compilation of work both old and new. The original Play Fair was drafted in 1982 and produced by Sister Florence Nightmare, RN, and Sister Roz Erektion together with pioneering community members such as Doctors Bill Owen and Tom Waddell (an original producer of the Gay Games). Play Fair was groundbreaking in that it was the original call to action and the first queer-positive, safer-sex pamphlet. It was and is still an alternative life-affirming manifesto for alternative people providing alternative information to help folks decide how to play safe, play sane and Play Fair!

The reboot of Play Fair in 1997 reformatted the pamphlet and updated its content, calling what we used to know as "gay cancer" by the name we eventually all came to know all too well: HIV. Thanks to the amazing artwork of Jim Jeske, a.k.a., Sister Reyna Terror and the Play Fair committee at the time (Sister Dana Van Iquity, Sister MaryMae Himm and Sister Saki Tumi, Dr. Virginia Cafaro, Michiko Bailey and Stephan Thorne), Play Fair 2.0 became a resource to a whole new generation.

In this 30th year of Play Fair, we have attempted to go a bit further beyond our ancestresses by not only evaluating language more closely for judgmental terms, but also by updating information to ensure our brothers and sisters have the necessary info to still stay well and Play Fair! The following individuals broke a nail or two on a keyboard in this update: Sister Dana Van Iquity, editor; Sister Eden Asp, Sister T'aint A Virgin, Sister Eve Volution, Sister Honey BE!, Sister Violet Sin Bloom, Sister Constance Lee Craving, Guard TheO Pressed and Novice Sister Dharma Getten. Sister Reyna Terror once again provided fabulous cartoon illustrations. Okay. Now, stop reading this and go out and Play Fair!



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