I Think I Might Be

Advocates

<u>Rights.</u> Respect. Responsibility.

Asexual

"Trust your gut and allow yourself the grace and gentleness of uncertainty for as long as you need. You have your whole life to figure out who you are and what you want. You can identify as ace now and change your mind later. You can identify as ace but sometimes experience sexual attraction. You can choose to have or not to have sex for a million valid reasons. None of this is hard and fast, and most importantly, you don't owe anyone an explanation."



What Does It Mean to Be Asexual?

Someone who is asexual doesn't experience sexual attraction and/or doesn't desire sexual contact. Asexuals may also use shorthand like "Ace" to describe their sexual orientation. An asexual person can be straight, gay, bisexual or queer because sexual attraction is only one kind of attraction.

An asexual person may or may not identify as LGBTQ. It's important to ask, and respect their preference. Someone can still be physically, emotionally, mentally and/ or spiritually attracted to someone, date, fall in love and/or get married, even if they don't have sex, don't like sex or don't want to have sex. Some asexuals may still have sex or masturbate, while others may not. Being ace just means you don't desire sex.



Sex - when you're born, the doctor decides if you are male or female based on if you have a penis or vagina

Gender - What defines someone as feminine or masculine, including how people expect you to behave as well as how you feel and identify

Sexual orientation - to whom you are sexually attracted. Sexual orientation isn't dictated by sex or gender; trans folks can be any sexual orientation.

Cisgender - When your sex assigned at birth and your gender match up as society expects, as in, someone born with a vagina feels like a girl.

Intersex characteristics

- Someone with intersex characteristics has genitalia and/or chromosomes that don't fit into the typical medical binary of female and male sex.



How Do I Know If I'm Asexual — And Is It Normal?

Asexuality is completely normal! It's a healthy sexual orientation just like being gay or being straight, and you can still have normal relationships. It can be confusing, trying to figure out if you're asexual, especially since sex is so prevalent in our culture. It may be difficult or take time, and that's ok! Some people know from a young age that they aren't, and some don't figure it out until later. Both are normal. If you think you might be asexual, try asking yourself these questions:

- Have you ever been sexually attracted to another person?
- Do you want to have sex or engage in sexual practices?
- If you want to date or get married at some point, do you want sex to be a part of that relationship?
- If you've had sex or engaged in sexual practices before, was it something you liked? Would you want to do it again? How were your feelings about the experience different or similar to your friends or partners' experiences?

It's okay if you don't have answers for these questions yet, or if your feelings are still unclear. Discovering your sexuality/sexual orientation can take time, and sometimes what you call yourself or how you identify might change. It's normal for sexuality to change and develop. Only you will know how to label yourself correctly. "It's okay to experiment. It's okay to have 'phases', it's okay to try labels out for a while and learn they don't fit, or go back and forth. It takes time. And you're not a 'bad' person of your other identities for it."

- Noor

What is it like being young and asexual?

There can be misconceptions about young asexuals. Some people may assume that you are too young to understand your sexual orientation, however, you are the only one who can know how you identify. Social media has enabled young people to connect and find other asexual young people.

Finding community may be difficult at first, but it's important to feel connected and supported by people that understand you. Many people have blogs or YouTube channels where they talk about their experiences. There may also be groups at your school or on your campus that you can connect with. Finding people who will support you in your journey can help make it easier.

"I spent years feeling broken and worrying that my anxiety/dysphoria/ trauma history were holding me back from sex. In truth, asexuality and dysphoria and anxiety are all part of the complicated and ever-changing feelings I have about sex and my body, and that's ok! "

- Foster

Should I/How Do I Come Out?

Coming out is the process of accepting your sexuality, figuring out how open you want to be about it and telling those you want to know. You don't have to come out if you don't want to, before you're ready, or be open about your sexuality to everyone. However, accepting your sexuality is important, whether or not you come out.

If you do choose to come out, it's important to put your safety first. Start by choosing someone you trust, like a close friend, a sibling, parent, or a guidance counselor to confide in. There may be a wide range of reactions and having someone to talk to can help. Some people don't understand what it means to be asexual and it may be hard to know who will listen and be supportive. Some friends will accept you. Others may turn away from you or tell other people without your permission.

Telling family can sometimes be difficult. Some families are highly supportive, and some are not. You may choose to tell everyone or very few people, or somewhere in between. Coming out is very personal — there is no wrong way to do it.

In a healthy relationship, both partners:

Respect one another.

Enjoy activities independent of one another, as well as together. Use each others' preferred name and pronouns. Never use the wrong pronouns or name to intentionally hurt your partner. Trust one another.

Respect sexual boundaries and are able to say no to sex.

Have room to develop and mature, and value each other through these changes. Share sexual histories and sexual health status with one another.

Embrace

each other's

differences.

Respect each other's need for privacy.

> Approach sex and discussions about sex with the same mutual respect and trust applied to other issues

Discuss things calmly, allow for differences of opinion, and make compromises.

What about healthy relationships?

Everyone has the right to be safe and healthy within their relationships, free from physical or emotional coercion.

In unhealthy relationships, one or both partners are controlling, demanding, mean, and/or physically or emotionally abusive. Sometimes it's not so easy to decide if a relationship should be maintained the way it is, worked on, or ended before it goes any further. Partners should examine what is bothering them and what they would like to see change. Talk over these questions with each other, or with someone you trust, like a friend, teacher, or counselor. Think about what, if anything, you can each do to make the other feel more comfortable in the relationship.

Healthy relationships rely on clear communication. Saying what you mean in a way that others will understand can eliminate many stresses on relationships. You have a right to leave the relationship if it is not happy and healthy.

How can I practice safe sex if I choose to be active?

Some asexuals may choose to still have sex with a partner, so if you do decide to engage in sexual practices, it's important to practice safe sex. Being sexually healthy means deciding what you want and don't want to do with romantic/sexual partners; communicating clearly about your wants and needs; and taking precautions to protect yourself if you do decide to have sex. Oral, anal, and vaginal sex, including sex with toys/dildos, all come with some risk of sexually transmitted infections including HIV. You can prevent many sexually transmitted infections by using condoms. It's also a good idea to get tested for HIV and STIs with new partners. Knowing each other's status can help you make decisions about protecting yourself and your partner. It's also important to know that if someone with a penis and testicles, and someone with a vagina and uterus have vaginal intercourse, they can become pregnant. Use condoms or other birth control if you wish to prevent pregnancy. Some people with a vagina and uterus may chose to use birth control even if they aren't at risk of pregnancy.

		Oral Sex	Anal Sex	Vaginal Sex	
Ris	sks	HIV and STIs	HIV and STIs	HIV, STIs, and Pregnancy	
Protec	tion	Condoms, dental dam/Daily use of PrEP	Condoms/ Daily use of PrEP	Condoms/ Birth Control, Daily use of PrEP	

What about HIV and STIs?

HIV, human immunodeficiency virus, is a virus that you get from sexual fluids, from blood, or from breast milk of a person who has HIV. If you're having sex, it's a good idea to get tested regularly so you know your HIV status. It's a good health practice to get tested once a year. Knowing your HIV status is crucial to getting the care you need to stay healthy. Talking about your HIV status with partners is important too. That way you can make a plan that helps both of you stay healthy.

For oral or anal sex, condoms and dental dams can provide protection against HIV. You can also acquire HIV if you share needles for injecting drugs with a person who has HIV. To avoid this way of transmission, either don't inject drugs, or don't share needles. If you think you are likely to be exposed to HIV, for instance by having sex with a partner who is HIV positive, pre-exposure prophylaxis (PrEP) is a pill your doctor can prescribe that can give additional protection from HIV.

It's also important to know about sexually transmitted infections (STIs). These include chlamydia, gonorrhea, syphilis, HPV, and herpes. Some are chronic and, left untreated, all can have major impacts on your health. STIs don't always come with symptoms so it's important to ask your health care provider about them and get tested regularly. Condoms or dental dams also provide protection against STIs.

"Identifying as asexual has been a powerful part of me claiming space for myself and conceptualizing what I want and need. I still feel a lot of shame and guilt about establishing boundaries with partners, but it's been so freeing for me to realize that I don't need to perform sexuality to be worthy of love and affection."

- Foster

What are my rights?

Everyone has the basic human right to be who they are. No one but you has the right to determine your sexual orientation or how you live.

But sometimes, especially for young people, laws, school policies, and authorities don't reflect our basic rights. It's a good idea to look up laws and policies in your state and school. If your school isn't supportive of asexuality (for instance, sex ed classes don't include information about being ace), and you're interested in working to change that, visit <u>www.advocatesforyouth.org</u> to find a community of youth activists who are working for acceptance and legal rights for LGBTQIA young people.

Where can I go if I am feeling unsafe or need support?

Think about supportive adults you know – is there a friend, neighbor, teacher, or school counselor you can trust?

Search online. There may be supportive groups in your area, or online networks which can provide support.

Check out communities of faith that might be supportive – many congregations have a mission of acceptance of LGBTQ people.

Title X clinics must offer confidential and affordable health care to young people, and many offer counseling services. Find by searching "Title X clinic near me."

Check out AMAZE.org, a fun and informative animated videos about sex, your body, and relationships.



ADVOCATES FOR YOUTH'S MISSION:

Advocates for Youth partners with youth leaders, adult allies, and youth-serving organizations to advocate for policies and champion programs that recognize young people's rights to honest sexual health information; accessible, confidential, and affordable sexual health services; and the resources and opportunities necessary to create sexual health equity for all youth.



Citations

1. Bogaert AF. Asexuality: prevalence and associated factors in a national probability sample. J Sex Res. 2004 Aug;41(3):279-87.