



**FEARLESS, AWARE,  
AND PROTECTED**



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# **FEARLESS, AWARE, AND PROTECTED**

**THE COMPREHENSIVE GUIDE TO OWNING YOUR SEXUAL HEALTH**



**YOUR BODY. YOUR CHOICES.  
YOUR POWER.**

**CREATED BY CHRISTOPHER ZACHARIE**



**HARNESS**

# **Fearless, Aware, and Protected: The Comprehensive Guide to Owning Your Sexual Health**

Created by Christopher Zacharie

The Harness Project

Stay Informed. Stay Protected. Stay Fearless.



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# Introduction - Fearless, Protected, Free

This book isn't here to scare you. It's here to arm you.

Because safER sex isn't about rules and restrictions. It's about freedom — the freedom to connect, to explore, to play without shame or fear. It's about having choices you can trust, and the confidence to use them.

Inside, you'll find every tool that matters: condoms, lube, barriers, PrEP, PEP, Doxy-PEP, ART, and U=U. Old-school shields and modern science. The classics, the breakthroughs, and the strategies that real people use every day to protect themselves and their partners.

This isn't theory. It's practical. It's evidence based. It's unapologetically sex positive.

By the last page, you'll have a personal blueprint — one that fits your life, your partners, your desires. Not someone else's checklist. Yours.

So, take a breath. Set the fear aside.

You're about to learn how protection becomes power — and how your pleasure can stay fearless.

Fearless, Aware, and Protected is built on three core principles:

**Fearless** means approaching sexual health from a place of confidence and self-respect, not anxiety or shame. Protection is not about fear—it is about freedom. When you understand your options and feel empowered to use them, you can engage in sexual experiences that align with your values and boundaries.

**Aware** means having access to accurate, comprehensive information about your body, your risks, and your choices. Awareness replaces ignorance with knowledge, allowing you to make informed decisions that protect both your physical and emotional well-being.

**Protected** means having a personalized plan that combines multiple strategies—barriers, medications, communication, and healthy habits—to create a shield of safety tailored to your life. Protection is not one-size-fits-all; it is a dynamic, evolving practice that adapts to your circumstances.

## A Note on Language

This book deliberately adopts plain-language, non-judgmental terminology throughout. You'll find a comprehensive glossary with clear definitions designed for accessibility. The language used here emphasizes a sex-positive, shame-free, non-stigmatizing vocabulary, aiming to replace clinical or judgmental language with practical, respectful terms. This book explicitly avoids moralizing or lecturing, favoring empowerment, clarity, and inviting open dialogue about sexual health and boundaries.

## Why "SafER" Sex?

You'll notice this book uses "safER sex" instead of "safe sex." This is deliberate. The term "safER" acknowledges that perfect safety is often unrealistic and that sexual health is about creating layers of protection rather than achieving absolute safety. SafER sex represents a harm-reduction approach that's:

- **Realistic** - Acknowledges that life is messy and people make choices
- **Flexible** - Adapts to different situations, relationships, and comfort levels
- **Empowering** - Focuses on what you can do, not rigid rules you must follow
- **Layered** - Combines multiple strategies for stronger protection

"It's not perfection—it's layers of protection. Every barrier, every conversation, every choice adds strength to your safety net."

## Author's Note - Why This Book Exists

I didn't write this book to repeat what you could Google. I wrote it because too often, the information out there feels clinical, judgmental, or just plain overwhelming. And that keeps people from using it.

I've spent years in classrooms, clinics, and communities, watching how knowledge lands differently depending on how it's shared. I've seen what happens when people are too afraid to ask questions, and I've seen the relief when someone finally explains prevention without shame.

That's why this book exists. To give you clarity, not confusion. To give you tools, not fear. To remind you that your body, your health, and your choices deserve respect — especially from you.

I don't believe safER sex is about saying no. It's about saying yes — with confidence, with protection, and without apology.

With declining STI rates (e.g., syphilis down 10% per CDC 2024 data) and new tools like long-acting PrEP, we're closer to ending epidemics. But access gaps remain—let's bridge them together.

— Chris

## Dedication

For everyone who ever wanted answers without shame. For everyone who deserves pleasure without fear. For everyone who knows their body is worth protecting.

This book is for you.

## Part I - Mindset of Protection

### Starts With You

Protection begins in the mind before it ever shows up in action. When we choose to see safety not as fear, but as freedom, we build habits that keep us healthy, confident, and in control. A strong mindset of protection is the foundation for every decision that follows.

## Chapter 1: Own Your Health

*"Respect yourself first; every other tool is just backup."*

SafER sex doesn't start with condoms or pills—it starts with you. With how you treat your body, the respect you give yourself, and the choices you make before anyone touches you. This isn't about restriction. It's about freedom: knowing you can enjoy sex without fear tagging along.

Before any tool, pill, or barrier comes into play, prevention begins with you. It's not only about reducing risks—it's about honoring your body, your desires, and your future. When you think about sexual health, most people imagine rules: Don't do this. Always do that. But safER sex isn't about fear. It's about freedom. It's knowing you can step into intimacy without carrying the weight of worry.

- **Self-care** is the foundation. When you take care of your body—getting tested regularly, knowing your status, staying mindful of your health—you create confidence.
- **Self-love** is the motivation. When you see your worth, you protect yourself not out of paranoia, but out of respect.
- **SafER sex** is the practice. It's not perfection—it's layers of protection. Every barrier, every conversation, every choice adds strength to your safety net.

In the chapters ahead, you'll see how condoms, PrEP, dental dams, and even open conversations with your partner fit together. None of these tools work in isolation. They're most powerful when

combined. That's the essence of combination prevention: using multiple strategies to reduce risk, while keeping pleasure and connection alive.

So, before we dive into the "how-to" of condoms or the science of PrEP, pause here:

## Reflection

- What does caring for your own health look like to you?
- What would change if you saw safer sex not as a restriction, but as an act of self-respect?

## Chapter 2: The Erotic Art of Communication

*"How to Start the safer sex Conversation...Say It Out Loud"*

Silence doesn't protect anyone. The real power move is being able to talk about what you need before things heat up. Awkward at first? Maybe. But trust me—the ability to say "let's be safe" is sexier than pretending risk doesn't exist. If self-care is the foundation, communication is the bridge. You can own every prevention tool in the world, but if you can't talk about them with a partner, their power shrinks. Silence is risk. Conversation is protection.

### Why We Avoid "The Talk"

For many people, sex is easy to do but hard to discuss. We dodge the subject because:

1. We fear rejection: "What if they think I don't trust them?"
2. We fear judgment: "What if they think I'm dirty for bringing this up?"
3. We fear killing the mood: "What if it ruins the moment?"

But here's the truth: ask about protection, testing, or PrEP doesn't kill the mood—it builds trust. It shows that you value your partner and yourself.

### Scripts That Open Doors

You don't need perfect words. You just need your words. Here are some openers that keep the conversation natural:

- Before things heat up: "Hey, before we get too into this, I want to make sure we're both safe. Have you been tested recently?"
- When you want to use a barrier: "Condoms turn me on because they mean I can relax and just enjoy."
- When exploring new things: "I'm curious about trying [fill in specific act, like fisting, rimming, etc.]. What's your comfort level with that, and how can we make it safe for both of us?"

Notice these aren't lectures. They're invitations.

### The Power of Listening

A safer sex talk isn't just about you laying out your terms—it's about listening, too. Ask questions, give space for answers, and notice not only what's said, but how it's said. Does your partner respect your boundaries? Do they get defensive or dismissive?

How someone responds tells you more than their test results ever could.

### Consent as Conversation

Consent isn't a one-time yes—it's a continuous dialogue. Check in often:

1. "Is this still good for you?"
2. "Do you want to slow down?"
3. "Want to switch things up?"

These check-ins make partners feel seen and safe. They also reduce misunderstandings that can harm both relationships and health.

## Practice Makes Confidence

The first time you say, “Let’s talk about condoms,” it might feel awkward. That’s normal. The more you practice, the easier it gets. Try rehearsing in a mirror or with a trusted friend. By the time you’re with a partner, the words won’t feel so foreign.

## Reflection

- What conversations are you ready to have this week?

## Takeaway

Every condom, every pill, every barrier starts with a conversation. When you can talk openly about protection, you’ve already made sex saFER before it even begins. If you can talk about sex, you can protect yourself during it.

# Part II - Sexual Barriers: Tools for Freedom

## The Classics Still Work

Condoms, lube, dental dams, gloves, finger cots, toys—the barriers that keep bodies safe and pleasure high. These aren’t old tricks; they’re the foundation every new strategy stands on.

## Chapter 3: Condoms: The Frontline

*“The Original—and Still Essential—Tool of saFER sex”*

Condoms have been around for centuries. They’ve been mocked, misunderstood, and misused—but they remain one of the most powerful tools we have against HIV, STIs, and unintended pregnancy. Think of them as the frontline shield: simple, affordable, and—when used correctly—extremely effective.

## External (Male) Condoms

These are the most common type: a thin sheath rolled over the penis before sex.

The DOs:

- DO check the expiration date.
- DO open the package carefully—no teeth, scissors, or sharp nails.
- DO pinch the tip before rolling down to leave space for semen.
- DO use lube to prevent breakage (water- or silicone-based, never oil).
- DO hold the condom at the base during withdrawal.

The DON'Ts:

- DON'T store condoms in wallets or hot cars (heat weakens latex).
- DON'T double up (two condoms = more friction = more breakage).
- DON'T reuse. Ever!!!
- DON'T mix with oil-based products (Vaseline, baby oil, Crisco—yes, people try).

## Internal (Female) Condoms

Less famous, but just as effective. These are pouches worn inside the vagina or anus.

Why They’re Great:

1. Can be inserted hours before sex.



2. Cover more area around the vulva/anus, offering extra protection.
3. Give receptive partners more control.
4. Made of nitrile (not latex), so safe for people with latex allergies.

How to Use:

1. Squeeze the inner ring and insert like a tampon.
2. Ensure the outer ring rests outside the body, covering the opening.
3. Guide the penis (or toy) into the condom opening.

Common Myth:“You can use an internal and external condom together for double protection.”

Truth: That creates friction and makes both more likely to break. One condom at a time is enough.

## Lambskin Condoms

Yes, they exist. Made from sheep intestine. Effective against pregnancy—but not against HIV or STIs because the pores in the material are too large. In prevention terms: not worth the risk.

## Making Condoms Sexy

The biggest complaint? “They kill the mood.” But that’s a myth you can flip.

1. Try flavored condoms for oral sex.
2. Experiment with ribbed or textured varieties.
3. Incorporate putting on the condom into foreplay. (Use your mouth, make it playful.)
4. Remember: nothing kills the mood faster than stress about pregnancy or STIs. Condoms give you peace of mind—and peace of mind is sexy.

Quick Reference

Category	Details
Effectiveness	~98% with perfect use  ~85% with typical use
Cost	Often free at clinics, cheap at drugstores, available online in bulk
Access Tip	Many community centers and LGBTQ+ clinics hand them out no questions asked

## Takeaway

Condoms may not be flashy, but they work. They’re the foundation every other prevention method builds on. Master them, respect them, and don’t be afraid to get creative with them. Condoms aren’t old-fashioned—they’re timeless power moves.

# Chapter 4: Beyond the Condom: SaFER Oral Pleasure

## *“Barriers for Oral Play Because Mouths Count Too”*

Oral sex isn't “risk-free,” no matter what people tell you. Barriers like dental dams and gloves turn risky fun into smarter fun. They're not mood-killers—they're props that can actually turn up the play. When people think of “saFER sex,” they usually picture penetrative acts. But HIV and other STIs can also be passed during oral sex. That's where barriers come in—tools designed to keep bodily fluids from crossing while still letting pleasure flow.

### Dental Dams

A dental dam is a thin sheet of latex or polyurethane placed between the mouth and genitals or anus.

#### How They Work:

1. Lay it flat over the vulva or anus before oral sex.
2. Add a bit of water-based lube on the side that touches the skin to increase sensation.
3. Hold it in place with your hands or your mouth while exploring.

#### DOs:

- DO use a new one every time.
- DO check for holes or tears before use.
- DO store them in a cool, dry place.
- DO try flavored versions for more fun.

#### DON'Ts:

- DON'T flip it over and reuse.
- DON'T use oil-based lube (it can weaken latex).
- DON'T stretch it too far (it can snap).

**Pro Tip:** Don't have a dental dam? Cut a condom or latex glove into a square—it works in a pinch.

### Gloves & Finger Cots

Hands can transmit infections too, especially when cuts or rough skin are involved. Latex or nitrile gloves (or small finger cots) add a layer of protection during fingering, fisting, or toy play.

#### Why Use Them:

1. Prevents exchange of fluids through cuts, hangnails, or broken skin.
2. Reduces risk of passing infections like herpes or HPV through touch.
3. Keeps nails from scratching sensitive tissue.

**Bonus:** Add lube to the glove or cot for smoother sensation and less friction.

### Making Barriers Fun (Not Clinical)

The biggest misconception is that barriers kill pleasure. In reality, they can make things more playful:

1. Flavored barriers turn oral sex into dessert.
2. Gloves can feel erotic when paired with teasing or roleplay.
3. Incorporating barriers signals respect and care—major turn-ons in healthy intimacy.

#### Why It Matters

Oral sex isn't “risk-free.” Gonorrhea, chlamydia, herpes, syphilis, HPV, and (rarely) HIV can spread this way. With declining gonorrhea rates (down 10%), barriers remain key for prevention. Using barriers turns “risky fun” into safer fun.



# Takeaway

Barriers for oral and manual play are a sign of respect for your partner’s health and your own. They are not mood-killers; they are pleasure-enhancers.

## Chapter 5: Lube & Toys

*“Pleasure and Protection Go Hand in Hand”*

Lube isn’t just for when things get dry. It is a vital tool for safer sex that prevents friction, reduces the risk of condom breakage, and makes everything feel better. Toys are not just for solo play; they are excellent tools for exploring pleasure with a partner, and they need to be protected and cleaned just like any other part of your safer sex routine.

### Lube: Your Best Friend in Safer sex

Think of lube as the unsung hero of your sex life. It’s not a sign of failure; it’s a sign of intelligence and a commitment to pleasure.

Why Lube Matters:

- 1. Reduces Friction: Less friction means less chance of micro-tears in the skin or condom, which are potential entry points for STIs.
- 2. Prevents Condom Breakage: A dry condom is a weak condom. Lube keeps the latex strong and elastic.
- 3. Enhances Pleasure: Sex should feel good. Lube makes it smoother, easier, and more enjoyable for everyone involved.

*The Three Types of Lube:*

Lube Type	Best For	NEVER Use With	Quick Tip
Water-Based	Condoms, toys, all types of sex	Nothing—it’s universally safe	Reapply often, as it dries out quickly
Silicone-Based	Water play, anal sex, long sessions	Silicone toys (it degrades them)	Very slick and lasts a long time
Oil-Based	Massage, external play	Latex condoms (it breaks them down)	Only use with non-latex barriers

### The Golden Rule

If you are using a latex condom, stick to water- or silicone-based lube. NEVER use oil-based products like Vaseline, baby oil, or cooking oil—they can compromise the integrity of the condom in seconds.

## Toys: Playtime with Protection

Whether you're using a vibrator, a dildo, or a butt plug, toys are part of your sex life, and they need to be with the same safer sex care as your body.

Toy Safety Checklist:

- ☐ Clean Before and After: Use a dedicated toy cleaner or mild soap and warm water.
- ☐ Use a Barrier for Penetration: If a toy is going from one partner's body to another's (or from one orifice to another on the same person), use a new condom on the toy every time.
- ☐ Check Material: Ensure your toys are made of non-porous materials like silicone, glass, or metal. Porous materials (like jelly rubber) can harbor bacteria and are nearly impossible to clean properly.

## Takeaway

Lube and toys are essential parts of a pleasure-focused, safer sex life. Don't let a lack of lubrication or a dirty toy be the thing that introduces risk. Prioritize pleasure, and protection will follow.

# Part III - Medical Shields: Pills and Shots that Protect

Science as a Wingman

Medicine has changed the game. Pills that stop HIV before it starts. Treatments that make transmission impossible. Even antibiotics that block STIs after sex. Knowledge + science = power. Condoms and barriers are classics, but HIV prevention has evolved far beyond latex.

Today, medicine itself has become a prevention tool. Pills, shots, and treatments don't just save lives—they also reduce transmission and empower people to take charge of their sexual health like never before.

## Chapter 6: PrEP: Prevention in a Pill

*"Armor You Take"*

PrEP (Pre-Exposure Prophylaxis) is one of the most powerful medical tools in the modern safer sex toolkit. It is a daily pill or long-acting injection taken by HIV-negative people to prevent them from contracting HIV. Think of it as a daily armor that, when taken consistently, provides a highly effective barrier against the virus.

### How PrEP Works

PrEP medications contain drugs that are also used to treat HIV. When taken regularly, these drugs build up a protective shield in the body. If HIV enters the bloodstream, the medication prevents the virus from replicating and establishing a permanent infection.

### Effectiveness: The Power of Consistency

- Sexual Transmission: When taken as prescribed, PrEP is over 99% effective at preventing HIV through sex.
- Injection Drug Use: PrEP is at least 74% effective at preventing HIV among people who inject drugs.

### The Golden Rule

PrEP only works if you take it. Consistency is the key to its power.

## Options for PrEP

- Daily Oral PrEP (e.g., Truvada, Descovy): One pill per day.
- Long-Acting Injectable PrEP (e.g., Apretude/cabotegravir): Injection every 2 months.
- Yeztugo (lenacapavir): Injectable every 6 months, FDA-approved June 2025. CDC recommends as preferred option for high-risk individuals. Highly effective (>99% in trials); ideal for those who forget daily pills.

## Who Should Consider PrEP?

PrEP is recommended for anyone who is HIV-negative and at a higher risk of contracting HIV. This includes people who:

- Have an HIV-positive partner who is not virally suppressed (U=U).
- Do not consistently use condoms.
- Have been diagnosed with an STI in the past six months.
- Use injection drugs.

## Getting Started with PrEP

1. **Talk to Your Doctor:** PrEP requires a prescription. You'll discuss your sexual history and lifestyle.
2. **Get Tested:** You must be confirmed HIV-negative before starting. You'll also be tested for Hepatitis B and kidney function.
3. **Take It Daily (or follow injection schedule):** PrEP is most effective when taken every day at the same time.
4. **Follow Up:** You'll need regular check-ins (every 3 months for oral, 2-6 for injectable) for HIV testing, STI screening, and kidney function monitoring.

## Cost and Access

- Most insurance plans cover PrEP with no copay under the Affordable Care Act.
- Ready, Set, PrEP provides free medication for uninsured individuals.
- Manufacturer copay cards can reduce or eliminate out-of-pocket costs.

Cost should NEVER be a barrier to accessing PrEP.

## PrEP is Not a Substitute for Condoms

Important: PrEP only protects against HIV. It does NOT protect against other STIs (like syphilis, gonorrhea, chlamydia, or HPV) or prevent pregnancy.

For comprehensive safer sex, PrEP is best used in combination with condoms and regular STI testing.

## Takeaway

PrEP is a revolutionary tool that puts the power of HIV prevention directly into your hands. It is a choice that allows you to pursue pleasure with confidence and significantly reduce your risk of contracting HIV. Talk to your doctor—it could be the most important safer sex decision you make.

## Chapter 7: PEP: The 72-Hour Window

### *"The Emergency Play"*

PEP (Post-Exposure Prophylaxis) is the emergency brake in your safer sex toolkit. It's a course of medication taken after a potential exposure to HIV to prevent the virus from taking hold. It's not a substitute for regular prevention methods like PrEP or condoms, but it's a vital safety net for those moments when things don't go as planned.

### The 72-Hour Window

The most critical thing to know: PEP must be started within 72 hours (three days) of the potential exposure. The sooner you start, the more effective it is. Every hour counts. If you think you've been exposed to HIV, do not wait.

## When to Consider PEP

PEP is typically prescribed after:

- Unprotected sex with a partner whose HIV status is unknown or positive and who is not virally suppressed (U=U).
- Condom breakage or slippage with a partner whose status is unknown or positive.
- Sharing needles or works for injection drug use.
- Sexual assault.

## How to Get PEP

PEP is a prescription medication. You can get it from:

- Emergency rooms (ERs)—available 24/7.
- Urgent care clinics.
- Sexual health clinics.
- Your primary care provider.

When you go, be clear and direct: “I need to start PEP because of a potential HIV exposure.”

### What to Expect

- **Testing:** You will be tested for HIV before starting PEP to confirm you are negative.
- **The Course:** PEP involves taking a combination of HIV medications once or twice daily for 28 consecutive days.
- **Side Effects:** Like any medication, PEP can have side effects, such as nausea or fatigue. Your doctor can help manage these.
- **Follow-Up:** You will need follow-up HIV testing after you complete the 28-day course, typically at 4 weeks and 3 months.

## PEP IS NOT PrEP

- PrEP is taken before exposure to prevent HIV. It's for ongoing prevention.
- PEP is taken after exposure to stop HIV from establishing itself. It's for emergency use only.

If you find yourself using PEP more than once, it's a strong signal that you should talk to your doctor about starting PrEP for more consistent, long-term prevention.

## Takeaway

PEP is a powerful second chance. Know the 72-hour window, know where to get it, and don't hesitate to use it. It is a critical part of the modern safer sex landscape.

## Chapter 8: Doxy-PEP: A New Tool in Your Toolkit

### *“A New Layer Against STIs”*

Doxy-PEP (Doxycycline Post-Exposure Prophylaxis) is one of the newest and most promising tools in the safer sex toolkit. It's an antibiotic taken after sex that significantly reduces the risk of acquiring bacterial STIs.

### How Doxy-PEP Works

Doxy-PEP involves taking a single, high dose of the antibiotic doxycycline (200mg) within 72 hours (three days) after having condomless sex. The antibiotic works by killing any newly acquired bacteria that cause syphilis and chlamydia before they can establish an infection.

## Effectiveness and Recommendations

Clinical trials have shown Doxy-PEP to be highly effective:

- Syphilis: Reduced risk by over 70%.
- Chlamydia: Reduced risk by over 70%.
- Gonorrhea: Recent 2025 studies show it does NOT protect against gonorrhea due to resistance issues.

## Who is Doxy-PEP For?

Doxy-PEP is currently recommended for people who are at high risk of acquiring bacterial STIs, such as:

- HIV-negative men who have sex with men (MSM) and transgender women who have had a bacterial STI in the past year.
- People living with HIV who have had a bacterial STI in the past year.
- CDC expanded to include cisgender men in high-risk groups; monitor for antibiotic resistance.

## Doxy-PEP is Not a Silver Bullet

- It only targets bacterial STIs: It does not protect against viral STIs (like HIV, HPV, or Herpes) or prevent pregnancy.
- Antibiotic Resistance: There is concern that widespread use could lead to increased antibiotic resistance, especially for gonorrhea. This is why it's currently recommended only for high-risk individuals.
- Regular Testing is Still Required: Even with Doxy-PEP, regular STI screening every three months is still the standard of care.

## The New Combination Prevention

Doxy-PEP is a powerful addition to the combination prevention strategy:

- PrEP for HIV prevention.
- Condoms for broader STI and pregnancy prevention.
- Doxy-PEP for targeted bacterial STI prevention.

## Takeaway

Doxy-PEP is a game-changer for those at high risk of bacterial STIs, offering a new layer of protection. Talk to your sexual health provider to see if Doxy-PEP is right for you and remember that it works best when combined with regular testing and open communication.

## Chapter 9: ART: A Work of ART

*"The Science that Rewrites the Story"*

ART (Antiretroviral Therapy) is the medical treatment for people living with HIV. It's a combination of medications that, when taken daily as prescribed, suppresses the amount of HIV in the body to an undetectable level. This is the science that has transformed HIV from a death sentence into a manageable chronic condition.

## The Power of Undetectable (U=U)

The most profound outcome of effective ART is achieving an Undetectable Viral Load. This is the foundation of the globally recognized and scientifically proven message: Undetectable = Untransmittable (U=U).

## What U=U Means

- A person living with HIV who is on ART and has an undetectable viral load cannot sexually transmit HIV to a partner.
- This is not a theory or a hope; it is a fact confirmed by multiple large-scale studies.
- U=U removes the fear and stigma associated with HIV transmission, allowing people living with HIV to have sex with confidence and without the need for condoms for HIV prevention.

## Taking Your ART

Consistency is Key:

- ART must be taken every day exactly as prescribed by your doctor. Missing doses can allow the virus to multiply and become resistant to the medication.
- Your doctor will monitor your viral load with regular blood tests. The goal is to keep the viral load so low that it is undetectable.

## Treatment as Prevention (TasP)

ART is a powerful form of combination prevention. Not only does it keep the person living with HIV healthy, but it also acts as a public health tool by preventing new transmissions.

## Disclosing Your Status with Confidence

The U=U message empowers people living with HIV to disclose their status to partners with confidence. You can share the scientific fact that there is zero risk of sexual transmission. This is a massive shift from the fear-based narratives of the past.

## Takeaway

ART is a medical marvel that saves lives and prevents new infections. For those living with HIV, it is the path to health, freedom, and the ability to say with absolute certainty: Undetectable Equals Untransmittable (U=U). This is the ultimate form of safer sex for a serodiscordant couple (where one partner is HIV-positive and the other is HIV-negative).

## Testing as Empowerment

*“HIV testing is not about fear—it’s about clarity.”*

Knowing your status allows you to make informed decisions, protect yourself and your partners, and reduce anxiety.

## Recommended Frequency

- Every 3–6 months if you’re sexually active with multiple partners.
- Annually if your risk is lower.
- Before starting a new relationship so both partners know their status.
- After any potential exposure (condom breakage, sexual assault, etc.).
- CDC recommends routine HIV testing in all healthcare settings for adults/adolescents, per revised guidelines.

## Why It Matters

- Ends stigma: People with HIV who are undetectable are not “a risk.”
- Encourages treatment adherence: Early detection means early treatment.
- Creates healthier, safer communities: Testing breaks chains of transmission.

## Beyond HIV

Testing for STIs like chlamydia, gonorrhea, and syphilis is also crucial. Many are silent (no symptoms), but all are treatable. Early testing = easy solutions. CDC reports declines in major STIs (syphilis down 10%), but rates remain high—stay vigilant.

## Part III Takeaway

Modern prevention isn't just about barriers—it's about medicine, technology, and knowledge. Whether it's taking PrEP daily (or every 6 months with lenacapavir), rushing for PEP or Doxy-PEP after an accident, or understanding that U=U is a fact, we now have more tools than ever to stop HIV in its tracks. Prevention isn't about one choice—it's about layering options to build your strongest safety net.

## Part IV - Real Talk: Navigating the Gray Areas

Because Real Life Doesn't Always Follow the Pamphlet

Desire gets messy. People push boundaries. Substances blur judgment. This section faces the chaos head-on, with harm reduction and care at the center—no shame, just smart moves.

### Chapter 10: Pleasures, Kinks, and Fetishes

*"Exploring With Boundaries and Care"*

Sex isn't always vanilla, and life isn't always sober. People mix in kink, substances, and situations that don't look like a pamphlet. That doesn't mean safety disappears—it means we get smarter about it.

#### Why Talk About Kink?

Because people do it. From bondage to roleplay to impact play, kink is part of many people's sexual lives. Ignoring it doesn't make it disappear—it just makes it riskier.

#### Kink vs. Fetish: Understanding the Difference

Human sexuality is diverse, and people express desire in many healthy, consensual ways. Two words often used in these conversations are kink and fetish. Though they're related, they aren't the same.

Kink refers to any sexual interest, activity, or dynamic that falls outside of what's traditionally considered "mainstream."

Kinks may include things like role play, power exchange, sensory exploration, or other forms of creative expression. These interests can deepen intimacy, build trust, and allow partners to explore pleasure together. Importantly, most people with kinks can still enjoy sexual activity without them—a kink adds to arousal rather than defines it.

Fetish describes a more specific focus—a strong attraction to a particular object, body part, or material that becomes central to sexual excitement. Examples might include a fascination with feet, leather, or latex. For some, the fetish itself is necessary for arousal; for others, it simply enhances pleasure.

So, basically: Every fetish is a kink, but not every kink is a fetish. Kinks invite exploration. Fetishes anchor desire.

Both can be healthy parts of sexual expression when practiced with consent, communication, and respect for boundaries.

#### Kink and Safer Sex

Many kinks and fetishes involve an element of risk, which is why a well-defined safer sex plan is even more critical.



Kink/Activity	Primary Risk	Safer Sex Strategy
<b>Anal Sex (without condom)</b>	HIV, STIs, tears	Condom use, PrEP/PEP, U=U status, proper lube (silicone best), slow entry
<b>Fisting</b>	Tears, internal injury, infection	Extreme hygiene (trim nails, wash hands), lots of sterile lube, clear communication, know limits
<b>Watersports (Urinating)</b>	STIs, UTIs, bacterial infections	Only engage if both partners are informed & comfortable. Avoid open cuts
<b>Blood Play</b>	HIV, Hepatitis, blood-borne pathogens	HIGH RISK. Extreme caution, only by experienced, never share blades, sterile single-use gear

## Hygiene and Aftercare

- **Cleaning:** Thoroughly clean all toys, equipment, and body parts that have come into contact with bodily fluids.
- **Wound Care:** Any cuts, scrapes, or tears should be cleaned immediately and treated to prevent infection.
- **Aftercare:** Emotional aftercare is as important as physical safety. Check in with your partner(s) to ensure they are feeling good and respected after the scene.

## Consent and Communication in Kink and Fetish Play

Exploring kinks or fetishes can be an empowering and deeply intimate experience, but it requires trust, honesty, and mutual care. Consent isn't just a one-time "yes"—it's an ongoing conversation. Every person involved should feel free to express limits, needs, and curiosities without pressure or judgment.

### The Foundation

- **Enthusiastic Consent:** Consent must be freely given, reversible, informed, enthusiastic, and specific (FRIES).
- **Explicit Communication:** Talk about your desires and boundaries before the moment. What are the hard limits? What are the soft limits? What are the aftercare needs?

## Takeaway

Your kinks and fetishes are valid, but they require a heightened level of communication and care. The most powerful tool in any scene is the ability to talk openly about what you need to feel safe, respected, and fearless. Safer sex is the ultimate form of respect for your partner’s body and your own.

## Chapter 11: Harm Reduction in Action

*“Meeting People Where They Are”*

Mistakes happen. Desires get messy. Prevention isn’t about perfection—it’s about planning for the real world, where people drink, forget, or take risks. Harm reduction is the difference between shame and survival.

### The Philosophy of Harm Reduction

- **Pragmatism:** It accepts that safer choices are not always the easiest or most accessible choices for everyone.
- **Humanism:** It respects the rights of people who use drugs or engage in sex work and affirms that their health and well-being are valuable.
- **Focus on Immediate Health:** The primary goal is to prevent death, disease, and injury.
- **Non-Judgmental:** It avoids moralizing, shaming, or demanding that people stop a behavior before they can receive help.

### Harm Reduction in Safer Sex

The entire framework of this book—from promoting PrEP to advocating for U=U—is rooted in harm reduction.

Harmful Behavior	Abstinence-Only Approach	Harm Reduction Approach
Unprotected Sex	“Just say no.”	“Use a condom, use PrEP, get tested regularly, know your partner’s status, or at least use PEP if a mistake happens.”
Drug Use	“Stop using drugs.”	“Use clean needles (needle exchange), never use alone, have Narcan available, test your drugs for fentanyl.”
Sex Work	“Stop selling sex.”	“Provide condoms, offer regular STI testing, ensure safe working conditions, know your rights.”

### The “Good Enough” Standard

Harm reduction is about the “good enough” standard, not the “perfect” standard.

- **Perfect:** Using a condom, PrEP, and getting tested every month.
- **Good Enough:** Using a condom most of the time, or at least getting tested after a risk, or starting PrEP after a conversation with a doctor.

The goal is to move the dial from high risk to lower risk, one step at a time. A small step is better than no step at all.

## Drugs, Alcohol, and Decision-Making

Substances can lower inhibitions, blur judgment, and increase risk. The goal isn't to shame—but to plan.

1. **Set limits in advance:** Decide on safer sex boundaries before drinking or using.
2. **Buddy system:** Have a trusted friend who knows your plan.
3. **Prep before:** Carry condoms, lube, or PrEP doses so you're not caught unprepared.

## Injection Drug Use

Sharing needles is one of the highest-risk activities for HIV and hepatitis C transmission.

**Harm Reduction Steps:**

1. Use sterile, single-use syringes.
2. Never share works (needles, cookers, cottons, water).
3. Access syringe service programs (SSPs) where available.
4. Carry naloxone for overdose reversal—health isn't only about infection.

## Real-World Scenarios

1. **Condom broke during sex:** Don't panic. If within 72 hours, consider PEP. Get tested and talk to a provider.
2. **Partner refuses to use protection:** That's a boundary issue, not a technical one. Respect yourself enough to walk away.
3. **Exploring anonymous hookups:** Keep condoms and barriers in your pocket, and consider PrEP as added protection.

## Meeting Yourself with Compassion

Sometimes mistakes happen. A forgotten pill, a night without a condom, a choice made under pressure. That doesn't erase your worth. Prevention is a journey, not a purity test. What matters is the next step you take.

## Part IV Takeaway

Pleasure, kink, substances, and mistakes are all part of human reality. By layering protection, planning ahead, and practicing compassion, you can live fully without shame while still protecting your health. Prevention long

# Part V - Your Perfect MATCH

**Your Body, Your Rules, Your Plan**

You've built knowledge on mindset, barriers, medications, diverse practices, and harm reduction. Now turn it into action: a flexible, personalized safer sex plan that evolves with your life, relationships, and desires. This isn't rigid—it's empowering.

## Chapter 12: Piecing Together Your Personal Safer Sex Plan

*“Prevention works best when the pieces fit together”*

No universal template exists. Your plan reflects your identity, partners, risks, and pleasures. Layer strategies for robust protection (combination prevention)—the more layers, the stronger your freedom.

## The Four-Step Process

### Step 1: Know Yourself (Honest Reflection)

Start with self-awareness. Journal these:

- What sexual activities do I enjoy or explore (e.g., oral, anal, solo, partnered, kink)?
- How often am I sexually active? With one partner, multiple, or varying?
- What practices do I use now (e.g., condoms sometimes, PrEP daily)? What feels easy? What challenges me (e.g., access, stigma, mood)?
- My risk factors: Higher exposure to HIV/STIs? Partners with unknown status? Substance use affecting decisions?
- My priorities: Pleasure focus? Pregnancy prevention? Emotional safety?

**Pro Tip:** Sexual health links to mental health. If anxiety, past trauma, or stigma arises, seek supportive counseling—it's a strength.

### Step 2: Choose Your Layers (Build Your Toolkit)

Select what fits. Check or note yours:

#### Barriers (Physical Tools)

- ☐ External/internal condoms
- ☐ Dental dams/gloves for oral/manual play
- ☐ Water- or silicone-based lube
- ☐ Body-safe toys with barriers/cleaning

#### Medications (Medical Shields)

- ☐ PrEP (daily pill or twice-yearly lenacapavir injection—2025 game-changer for adherence)
- ☐ PEP (emergency 72-hour window)
- ☐ Doxy-PEP (post-exposure for bacterial STIs, high-risk groups)
- ☐ ART (if living with HIV—U=U means zero transmission risk)

#### Awareness (Knowledge & Testing)

- ☐ Regular HIV/STI screening (every 3-6 months if active)
- ☐ Partner status discussions
- ☐ Mpox vaccination if at risk (e.g., multiple partners)

#### Communication & Consent

- ☐ Scripts for boundaries/testing
- ☐ Ongoing check-ins ("Still good?")
- ☐ Clear negotiation for kink or new acts

#### Habits & Harm Reduction

- ☐ Stock supplies accessibly
- ☐ Pre-plan for substances (boundaries while clear-headed)
- ☐ Reduce risks practically (e.g., fewer partners temporarily)

### Step 3: Prepare for "What Ifs" (Real-Life Resilience)

Plan ahead to stay calm:

- Condom breaks/slips? Withdraw gently, new barrier, consider PEP/Doxy-PEP, test in 2-4 weeks.

- Unprotected exposure? PEP within 72 hours; Doxy-PEP for bacterial STIs.
- Positive STI test? Most treatable—notify partners compassionately, treat promptly.
- Partner resists protection? Hold boundaries (“This matters to me”); PrEP adds layers if needed.
- Substances blur judgment? Reflect non-judgmentally; adjust habits.

#### Step 4: Make It Real (Implementation & Review)

Write/phone note your plan—review every 3-6 months or life changes.

- Share with trusted friend/accountability partner.
- Stock essentials; bookmark resources.
- Celebrate progress—small steps build confidence.

## The MATCH Framework: Your Quick-Reference Blueprint

MATCH organizes your plan—fill it out!

### M = Medications

Examples: Daily PrEP + emergency PEP access.

Your plan: \_\_\_\_\_

### A = Awareness

Examples: Test every 3 months; know U=U.

Your plan: Next test date: \_\_\_\_\_

### T = Tools

Examples: Condoms/lube always stocked; dental dams for oral.

Your plan: Stock location: \_\_\_\_\_

### C = Communication

Examples: “I use PrEP—let’s talk testing” script.

Your plan: One boundary/script: \_\_\_\_\_

### H = Habits

Examples: Weekly supply check; sober boundary-setting.

Your plan: One new habit: \_\_\_\_\_

## Guided Reflection Prompts

- My safer sex vision: What does fearless pleasure feel like?
- Biggest insight: How has this shifted my approach?
- One commitment: My first step this week?

## Vision for Status-Neutral Sexual Health

This program embraces “status-neutral” care—a modern, stigma-free approach to HIV and sexual health.

Status-neutral care means everyone gets the same affirming, high-quality services, no matter your HIV status. One door, one compassionate system:

Get tested (often with other STI checks).

- HIV-negative? Access prevention like PrEP, PEP, barriers, and support to stay negative.
- HIV-positive? Link immediately to treatment (ART) for health and U=U (zero transmission risk).
- No judgment, no separate paths—just whole-person care focusing on your life, pleasure, and well-being. This reduces stigma, boosts testing/treatment, and aligns with 2025 CDC goals for equity.

In your MATCH plan, think status-neutrally: Make informed choices based on knowledge, not fear. Everyone deserves fearless sexual health—prevention or treatment, you're supported.

Find status-neutral providers via [hiv.gov](https://hiv.gov) or local clinics.

## Fearless Quick Start if Overwhelmed

1. Get tested/know status.
2. Stock barriers + practice use.
3. Have one honest conversation.

### Takeaway

Your plan is living—adapt without perfectionism. Layering = power. You deserve pleasure with peace of mind.

## Resources & Next Steps

### Core Hotlines (U.S.)

- CDC Info: 1-800-CDC-INFO
- HIV Hotline: 1-800-448-0440
- Planned Parenthood: 1-800-230-PLAN

### PrEP/PEP Access

- Ready, Set, PrEP (free for uninsured): [readyssetprep.hiv.gov](https://readyssetprep.hiv.gov)
- Locator: [prelocator.org](https://prelocator.org) (includes lenacapavir sites)

### Testing & Care

- Free/low-cost: [gettested.cdc.gov](https://gettested.cdc.gov)
- Status-neutral clinics: [hiv.gov](https://hiv.gov) (prevention + treatment without stigma)

### More Support

- U=U: [preventionaccess.org](https://preventionaccess.org)
- Harm Reduction: [harmreduction.org](https://harmreduction.org)
- Mpox Vaccine Info: [cdc.gov/mpox](https://cdc.gov/mpox)
- Hepatitis B Vaccine: Recommended for all unvaccinated adults at risk—talk to provider.

Local resources: Ask your clinic or facilitator.

## Closing - Fearless Belongs to You

Sexual health empowers, not restricts. It frees you to connect deeply, explore boldly, and live authentically—without shame weighing you down.

You've mastered tools from timeless barriers to cutting-edge medicine. You've built layers of protection that enhance pleasure and honor your worth.

### The Truths You Can Carry

As you close this book and step back into your life, carry these truths with you:

**Perfection isn't required**—preparation is. You don't have to do everything right every time. You just have to care enough to try.

**Fear has no place here**—knowledge does. When you know the facts, fear loses its grip. You can act with confidence, not anxiety.

**Your body is worth protecting.** Not because sex is dangerous, but because you are valuable.

**Pleasure and protection are not opposites.** They are partners. Safer sex enhances intimacy—it doesn't diminish it.

This work is never finished. Sexual health is a practice, not a destination. Check in with yourself regularly, adjust your plan as needed, and keep learning.

## A Final Word

The title of this book is Fearless, Aware, and Protected. Those three words are not just a summary—they're a promise. A promise that you can pursue pleasure without fear, make choices with full awareness, and build layers of protection that honor your health and your humanity.

You are not powerless. You are not reckless. You are not alone. You are informed, equipped, and ready to own your sexual health with confidence.

So go ahead. Live your life. Pursue your desires. Connect with others. And do it all knowing that you have the tools, the knowledge, and the plan to stay safe, stay healthy, and stay fearless.

**Stay informed.**

**Stay protected.**

**Stay fearless.**

— Christopher Zacharie

## Appendices

- Glossary: Key terms in plain language you can use.
- Quick Reference Charts
- The Quick Start Guide: Put MATCH into action today.
- The MATCH Framework: Medications, Awareness, Tools, Communication, Habits
- Printable MATCH Worksheet: Blank template for your plan.
- Fearless Foundations: A companion ritual to The Quick Start Guide and The MATCH Framework.
- Safer Sex Agreements: Boundaries and protection in writing.

## Glossary of Key Terms

**Antiretroviral Therapy (ART):**

Daily medication for people living with HIV that suppresses the virus, allowing the immune system to recover and preventing transmission (U=U).

**Barrier Method:**



Any device used to prevent the exchange of bodily fluids during sex (e.g., condoms, dental dams, gloves).

#### **Combination Prevention:**

Using multiple prevention strategies at once (e.g., condoms + PrEP + regular testing) to create a stronger safety net.

#### **Dental Dam:**

A thin, square sheet of latex or polyurethane used as a barrier during oral sex on the vulva or anus.

#### **Doxy-PEP (Doxycycline Post-Exposure Prophylaxis):**

Taking the antibiotic doxycycline within 72 hours after sex to prevent bacterial STIs like syphilis and chlamydia.

#### **Fetish:**

An intense, often sexual, fixation on a non-living object (like shoes, rubber) or a specific non-genital body part (like feet, hair) that becomes necessary for arousal or gratification

#### **Harm Reduction:**

A set of practical strategies aimed at reducing the negative consequences associated with risky behaviors (like unprotected sex or drug use) without necessarily stopping the behavior itself.

#### **HIV (Human Immunodeficiency Virus):**

A virus that attacks the body's immune system. If untreated, it can lead to AIDS.

#### **Kink:**

Sexual practices, dynamics, or interests that fall outside of mainstream or "vanilla" sexuality, often involving roleplay, power exchange, or specific scenarios.

#### **Lube (Lubricant):**

A substance used to reduce friction during sex, which increases pleasure and helps prevent tears that can increase STI risk.

#### **PEP (Post-Exposure Prophylaxis):**

A 28-day course of HIV medication taken after a potential exposure to prevent infection. Must be started within 72 hours.

#### **PrEP (Pre-Exposure Prophylaxis):**

A daily pill or bi-monthly injection taken by HIV- negative people prevent acquiring HIV.

#### **Status-Neutral:**

A patient-centered public health model for HIV, focusing on providing comprehensive care and support (prevention like PrEP or treatment like ART) to everyone, regardless of their HIV test results, to reduce stigma and improve health equity by treating all individuals as having similar needs for support services (housing, food, mental health). It bridges HIV prevention and treatment, making

services seamless and stigma-free by putting the person, not their status, first, aiming for optimal health for all.

**STI (Sexually Transmitted Infection):**

An infection passed from one person to another through sexual contact. Also known as STD.

**U=U (Undetectable = Untransmittable):**

A scientifically proven fact that a person living with HIV who takes ART as prescribed and has an undetectable viral load cannot transmit HIV to their sexual partners.

## **Quick Reference Charts**

### ***Condom Types***

Type	Protects Against Pregnancy	Protects Against HIV/ STIs	Notes
Latex	✓ Yes	✓ Yes	Most common, affordable, widely available. Not for people with latex allergy.
Polyurethane	✓ Yes	✓ Yes	Good alternative for latex-sensitive users. Thinner feel.
Nitrile	✓ Yes	✓ Yes	Strong, non-latex option. Works well for internal condoms.
Lambskin	✓ Yes	✗ No	Only prevents pregnancy. Porous material allows viruses to pass.
Polypropylene	✓ Yes	✓ Yes	Soft, stretchy, latex-free. Popular newer option.

## *Lube Guide*

Type	Condom-Safe	Toy-Safe	Best Use	Cautions
Water-based	✔ Yes	✔ Yes	General use, vaginal or anal sex	Dries quickly, may need reapplication
Silicone-based	✔ Yes	✗ No	Long-lasting, anal sex, shower play	Can damage silicone toys
Oil-based	✗ No	✗ No	Massage, external play	Breaks condoms, hard to clean
Hybrid (water + silicone)	✔ Yes	Some	Balanced feel, longer-lasting than water- based	Check labels for toy compatibility

## *PrEP Yourself*

Form	When Protection Begins	Dosing	Notes
Daily pill (oral)	7 days for anal sex, 21 days for vaginal/frontal sex	1 pill per day	Requires consistent daily use
On-demand (2-1-1 dosing, oral)	2–24 hours before sex, then 1 pill 24 hrs later, 1 pill 48 hrs later	For occasional use	Now recommended by CDC for cisgender men who have sex with men (MSM), though still not FDA approved for all groups.
Injectable (Apretude)	Protective within 7 days	Injection every 2 months	Great for those who struggle with daily pills
Twice- Yearly Injections (Yeztugo/lenacapavir)	After first dose (full protection in 7 days)	Injection every 6 months  Twice a year	FDA-approved in 2025; ideal for those preferring less frequent dosing.

## *PEP Basics*

What It Is	When to Start	Duration	Where to Get It
Emergency HIV prevention meds taken after exposure	Within 72 hours (ideally within 2)	28 days	ER, urgent care, sexual health clinics

*All About Doxy-PEP*

Category	Details
What it is	An antibiotic strategy using doxycycline after sex to reduce the risk of bacterial STIs.
Target Infections	Syphilis and Chlamydia
How it works	Taken within 72 hours after condomless sex, doxycycline can kill bacteria before infection takes hold.
Typical Dose	200 mg of doxycycline (usually 2 x 100 mg pills), single dose after exposure.
Who it's for	Primarily studied in men who have sex with men (MSM) and transgender women at high risk of STIs. Some providers now expanding use case cautiously.
Effectiveness	Shown in trials to reduce syphilis by 87%, chlamydia by 88%, gonorrhea by 55%. Ongoing concerns about antibiotic resistance, especially for gonorrhea.
Possible Side Effects	Nausea, diarrhea, photosensitivity (sunburn risk), stomach upset.
Concerns	Long-term impact on antibiotic resistance is still being studied. Not a substitute for condoms, PrEP, or regular STI testing.
Access	Not yet widely available everywhere; often prescribed off-label where doctors are informed about Doxy-PEP.
Best Practice	Combine with regular STI/HIV testing, PrEP (if indicated), and open conversations with partners/healthcare providers.



# References

This guide is informed by evidence-based research and guidelines from trusted organizations, including:

- Centers for Disease Control and Prevention (CDC)
- World Health Organization (WHO)
- U.S. Preventive Services Task Force
- American Sexual Health Association
- Planned Parenthood
- The Prevention Access Campaign (U=U)

For the most up-to-date information on sexual health, consult your healthcare provider and visit the resources listed above.

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**Fearless, Aware, and Protected: The Comprehensive Guide to Owning Your Sexual Health**

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Empowering Sexual Health Education

Your Body. Your Choices. Your Health. Your Power.

***Educational Content Only. Not Medical Advice.***

This guide is designed for educational purposes and should not replace professional medical advice, diagnosis, or treatment. Always consult a qualified healthcare provider for personal medical guidance.

The information presented reflects current best practices in sexual health education and harm reduction. Medical recommendations and guidelines may evolve over time. Readers are encouraged to verify information with healthcare professionals and stay informed about the latest developments in sexual health.

**Stay Informed. Stay Protected. Stay Fearless.**

IT'S YOUR  
JOURNEY.

FEARLESS, AWARE,  
AND PROTECTED

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YOUR  
CHOICES.

# FEARLESS, AWARE, AND PROTECTED

THE COMPREHENSIVE GUIDE TO OWNING YOUR SEXUAL HEALTH

THE **MATCH** FRAMEWORK

Created by Christopher Zacharie

PREVENTION WORKS BEST WHEN THE MATCH FRAMEWORK IS USED

FEARLESS, AWARE, AND PROTECTED  
THE COMPREHENSIVE GUIDE TO OWNING YOUR SEXUAL HEALTH

## QUICK START GUIDE

Everything you need to start today

Created by Christopher Zacharie

Disclaimer: Educational content only. Not medical advice. Consult a qualified healthcare provider for personal medical guidance.

THREE  
TOOLS.

## FEARLESS FOUNDATIONS

YOUR BODY, YOUR BOUNDARIES, YOUR BOLD PLAN.

A Companion Ritual to the Quick Start Guide & MATCH Framework

This worksheet is your space to slow down and design safety on your own terms.

Reflect. Reclaim. Reimagine what protection can feel like.

Be prepared. Be bold. Be unapologetically you.

ONE  
MISSION.

# Own Your Sexual Health.

Explore interactive guides that strengthen your choices, your pleasure, and your protection.

FEARLESS, AWARE, AND PROTECTED

## QUICK START GUIDE

Everything you need to start today  
Created by Christopher Zacharie

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### 1. KNOW YOUR OPTIONS

**Condoms & Dental Dams**  
Everyday barriers.  
Cheap, easy, effective.

**PrEP** ★  
Daily pill or shot every 2 months. Stops HIV before it starts.

**Doxy-PEP** ★  
Antibiotic after sex to prevent some STIs.

**Lube & Toys**  
Barriers that reduce friction, prevent tears, add fun.

**PEP** ★  
Emergency pills. Start within 72 hours after exposure.

**ART → U=U** ★  
Treatment that makes HIV★ undetectable and untransmittable.

### 2. QUICK START YOUR FEARLESS

Plan, Protect, Own it!

- Medications**- Medical Shields- Pills and Shots that Protect
- Awareness**- Know Your Status; Get Tested
- Tools**- External/Internal Condoms, Dental Dams, Gloves, Lube, Toys
- Communication**- Talk About IT Openly, Safer Sex Contract
- Habits**- Self-Care & Safety First, Respect Others, Reduce Risk

### 3. EMERGENCY MOVES

- Condom broke? → Call for PEP within 72 hours. The Sooner, the Better
- Forgot a PrEP dose? → Take it as soon as you remember. Do not double dose
- Exposed to STI? → Ask about testing and Doxy-PEP.
- Need testing? → Every 3-6 months if active with multiple partners.

### 4. CONVERSATION STARTERS

You don't need perfect words. You just need your words. Here are some openers that keep the conversation natural. Say the phrases aloud for practice:

“Hey, before we get too into this, I want to make sure we're both safe. Have you been tested recently?”  
“Condoms turn me on because they mean I can relax and just enjoy.”  
“I'm curious about trying \_\_\_\_\_. What's your comfort level with that, and how can we make it safe for both of us?”

### 5. REMEMBER THIS

Remember This:

Be Prepared, Not Perfect.  
Protection IS Freedom.  
It's Your Body, Your Health,  
Your Choice, Your Power.

### 6. SIDE-NOTES

Stay Connected, Stay Informed

You don't have to do this alone — help is one call, one click, one clinic away.

**National Hotlines (U.S.)**

- CDC Info Line: 1-800-232-4636
- HIV/AIDS Hotline: 1-800-CDC-INFO
- Trevor Project (LGBTQ+ youth): 1-866-488-7386

**Trusted Websites**

- CDC HIV Prevention: [cdc.gov/hiv](https://www.cdc.gov/hiv)
- HIV.gov: [hiv.gov](https://www.hiv.gov)
- PrEP Locator: [prepstatus.org](https://www.prepstatus.org)
- POZ Magazine: [poz.com](https://www.poz.com)

**Apps & Tools**

- My PrEP Daily**: Pill Reminder App
- Sex Positive** (University of Oregon): Interactive Guide to Sex & Safety
- Planned Parenthood Chat/Text**: Real-time answers to health questions

**Finding Affordable Care**

- Many health departments offer **free HIV/STI testing**.
- Ryan White clinics** provide services for those living with HIV.
- Generic PrEP** options are available through **assistance programs**.

### 7. POWER ACRONYMS

- HIV** - Human Immunodeficiency Virus
- ART** - AntiRetroviral Therapy
- PrEP** - Pre-Exposure Prophylaxis
- PEP** - Post-Exposure Prophylaxis (HIVs Morning After Pill)
- DOXY-PEP** - Doxycycline Post-Exposure Prophylaxis (STIs Morning After Pill)
- U=U** - Undetectable = Untransmittable



# THE MATCH FRAMEWORK

Created by Christopher Zacharie

**PREVENTION WORKS BEST WHEN THE 'PIECES' FIT TOGETHER**

Safer sex isn't about one single choice - it's about finding the right combination that works for you. Combination Prevention is a personalized approach to sexual health. Each piece of the MATCH framework (Medications, Awareness, Tools, Communication, and Habits) connects like a puzzle, creating a plan that protects, empowers, and adapts to your life.

## FIND YOUR PERFECT MATCH

**Medications**  
  
**Medical Shields**  
 PrEP: Prevents HIV before exposure.  
 PEP: Emergency prevention after exposure.  
 ART: Treatment stops transmission.  
 Doxy-PEP: Antibiotic to prevent some STIs.

**Awareness**  
  
**Know Your HIV Status & Health**  
 Get tested regularly.  
 Understand personal risk.  
 Stay updated on new prevention methods and guidelines.

**Tools**  
  
**Use Protection to Reduce Infections**  
 Barriers: External & internal condoms, dental dams, gloves, toys, and lube.

**Communication**  
  
**Talking it Out**  
 Discuss sexual history openly.  
 Share test results.  
 Foster trust with partners.  
**Consent is Key**  
 Practice harm reduction (promoting safety, respect choices, reduce risk) without judgment or shame.  
 Prioritize mental & physical self-care.

**Habits**  
  
**Holistic Health & Protection**  
 Practice harm reduction (promoting safety, respect choices, reduce risk) without judgment or shame.  
 Prioritize mental & physical self-care.

**It's Your Body, Your Choices, Your Health, Your Power**

**FEARLESS, AWARE, AND PROTECTED**

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### Piece By Piece

Answer the following questions to create your personal safer sex puzzle:

- 1. Medications (M)**
  - Am I a good candidate for PrEP? (If yes, when will I talk to my doctor?)
  - Do I have a plan for getting PEP if I need it? (Which clinic or ER will I go to?)
  - Am I up-to-date on my HPV and Hepatitis B vaccines?
- 2. Awareness (A)**
  - When was my last full STI screening? (Schedule the next one now.)
  - What is my partner's status? (If unknown, what is my plan?)
  - What are the signs of an STI I should be aware of?
- 3. Tools (T)**
  - Do I always have condoms and a condom-compatible lube accessible?
  - Do I have a dental dam or a plan to make one if I need it?
  - Do I have a regular routine for cleaning my sex toys?
- 4. Communication (C)**
  - What are three go-to phrases I can use to start a safer sex conversation?
  - Do I feel comfortable asking my partner about their recent testing?
  - Do I practice enthusiastic consent every time?
- 5. Habits (H)**
  - How often will I get tested (e.g., every 3, 6, or 12 months)?
  - What is my self-care ritual after sex?
  - What is one thing I will do this week to prioritize my sexual health?

# FEARLESS FOUNDATIONS

## YOUR BODY, YOUR BOUNDARIES, YOUR BOLD PLAN.

### A Companion Ritual to the Quick Start Guide & MATCH Framework

This worksheet is your space to slow down and design safety on your own terms.

Reflect. Reclaim. Reimagine what protection can feel like.

Be prepared. Be bold. Be unapologetically you.



## 1. MATCH YOURSELF

Which pieces of the puzzle are already yours?



**Medications**

**Tools**

**Healthy Habits**

**Awareness**

**Communication**

**M**  
**A**  
**T**  
**C**  
**H**

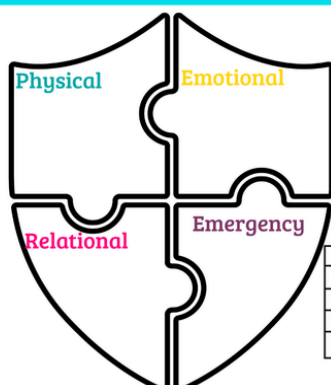
**M**  
**A**  
**T**  
**C**  
**H**

Which ones feel unfamiliar, intimidating, or exciting?

☐ Circle what you've tried.  
☐ Star what you want to explore.  
 Add notes or questions.

## 2. MY PROTECTION PLAN

Design your shield of safety.



## My Strength Shield

Add one word or symbol that represents your strength or protection energy.

Use icons or minimalist line art for each quadrant.

Use reflection prompts below as your guide.

Quadrant	Focus	Reflection Prompt
Physical	Barriers/Meds	What barriers or meds do I use or want to try?
Emotional	Inner Safety	What helps me feel calm, safe, and confident?
Relational	Agreements	What boundaries or agreements matter most?
Emergency	Backup Plan	What's my plan if something goes wrong—or feels off?

### 3. CONVERSATION PRACTICE (Fill-in-the-Blanks)

Powerful words start powerful protection.



"I feel most confident when \_\_\_\_\_."

Rewrite these in your own voice—or say them out loud to practice.

"I feel most respected when \_\_\_\_\_."

"Can we talk about \_\_\_\_\_ before we get physical?"

"I'd like us to use \_\_\_\_\_ because it helps me feel safe."

"I'm on \_\_\_\_\_. Are you?"

"I relax more easily when \_\_\_\_\_."

"Before we try something new, can we talk about \_\_\_\_\_?"

"When I say No, please \_\_\_\_\_."

### 4. POWER STATEMENTS

Write your truth. Claim your power.



Positive affirmations are present-tense, empowering statements that are used to challenge negative or unhelpful thoughts, build self-confidence, and cultivate a positive mindset. By regularly repeating these statements, the goal is to reframe self-talk and gradually embed new beliefs into the subconscious mind to help make those positive outcomes a reality.

"I protect myself because I'm worth it."

"MY BOUNDARIES ARE SACRED." "FEARLESS DOESN'T MEAN CARELESS."

"I'm not afraid to ask for what I need." "SAFETY IS SEXY!"

"I AM FEARLESS AND PROTECTED."



### MY POWER STATEMENT

Write your own affirmation below

---



---



---

### 5. REFLECTION & RITUAL

Your next bold move.



What does being fearless mean to me?

---

What's one small action you'll take this week to feel more protected?

---

Who can you share this plan with?

---

### Optional Rituals:

- Light a candle or play a song while completing this worksheet.
- Sign your name as a quiet declaration of commitment.
- Keep this page somewhere visible as a daily reminder of your strength.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2 of 2



### SEXUAL HEALTH COMMUNICATION AGREEMENT

**PURPOSE:** A collaborative agreement to foster open dialogue and mutual respect regarding sexual health, boundaries, and safer practices between partners.

#### PATIENT COORDINATION FORM

Partner 1 Name (Legal/Preferred):

[Fillable Text Box]

Partner 2 Name (Legal/Preferred):

[Fillable Text Box]

#### AGREED DISCUSSION TOPICS (Check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> STI Testing History & Schedules              | <input type="checkbox"/> Safer Sex Practices & Protection Use           |
| <input type="checkbox"/> Contraception & Pregnancy Prevention Methods | <input type="checkbox"/> Communication of Sexual Desires & Expectations |
| <input type="checkbox"/> Boundaries & Limits (Physical/Emotional)     | <input type="checkbox"/> Emergency Contacts & Medical Needs             |

#### CONSENT & COMMITMENT STATEMENTS

- ☒ I agree to open, honest, and non-judgmental communication about sexual health with my partner.
- ☒ I understand and respect my partner's boundaries, including the right to withdraw consent at any time.
- ☒ I commit to prioritizing the health and well-being of myself and my partner through shared information and responsible actions.
- ☒ I will participate in regular check-ins regarding our sexual health communication and agreements.
- ☒ This agreement is a tool for building trust and does not replace professional medical advice.

By signing below, both partners acknowledge their commitment to these core principles and agree to uphold them in their relationship. This agreement is a living document and may be revised by mutual consent.

Partner 1 Signature:

[Fillable Text Box for Digital Signature]

Partner 2 Signature:

[Fillable Text Box for Digital Signature]

Date: [Fillable Date Field in MM/DD/YYYY format]



Date: [Fillable Date Field in MM/DD/YYYY format]



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# BOUNDARY SETTING WORKSHEET



This worksheet is designed to help you explore and define your boundaries in a supportive, non-judgmental space. Your comfort and consent are paramount.

## MY SEXUAL HEALTH BOUNDARIES

Check all that apply to define your personal limits.

- ☒ Use of barrier methods (condoms, dental dams, etc.)
- ☒ Regular STI testing & sharing results
- ☒ Discussion of sexual history before intimacy
- ☒ Limiting number of partners
- ☒ Specific sexual activities I am comfortable with (list below if needed)
- ☒ Specific sexual activities I am NOT comfortable with (list below if needed)
- ☒ Privacy regarding sexual activities and partners
- ☒ Other: \_\_\_\_\_
- ☒ Other: \_\_\_\_\_
- ☒ Other: \_\_\_\_\_

Space for additional notes: \_\_\_\_\_

## COMMUNICATION STYLE PREFERENCES

How do you prefer to discuss sensitive topics?  
(Select all that apply):

- ☐ In person, face-to-face
- ☐ Over video call
- ☐ Through text/messaging for initial thoughts
- ☐ In a private, quiet setting
- ☐ With time to process before responding

Reflection Prompt: What helps you feel heard and understood during a conversation about boundaries?

\_\_\_\_\_

Reflection Prompt: What communication styles make you feel uncomfortable or unheard?

\_\_\_\_\_

## NON-NEGOTIABLES

Reflection Prompt: List the boundaries that are absolutely essential for your sense of safety and well-being. These are your firm limits that are not up for negotiation. Be as specific as possible.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Remember: It is okay to have firm boundaries. They are a form of self-care.

## FLEXIBLE AREAS

Reflection Prompt: List aspects of your sexual health and interactions where you are open to discussion, negotiation, or might be willing to compromise depending on the situation and partner.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Reflection Prompt: Under what conditions would you feel comfortable exploring these flexible areas?

\_\_\_\_\_

## CONSENT CHECK-INS

Preferred Frequency of Consent Check-ins:  
(Select all that apply)

- ☐ Before any new activity or change in intensity
- ☐ Regularly throughout an interaction (e.g., "Is this okay?", "Do you like this?")
- ☐ Before escalating intimacy
- ☐ At the beginning of each encounter

Preferred Methods for Consent Check-ins:  
(Select all that apply)

- ☐ Verbal confirmation ("Yes," "That feels good")
- ☐ Non-verbal cues (nodding, active participation, specific body language)
- ☐ A mix of verbal and non-verbal communication

Reflection Prompt: How can a partner best ensure they have your ongoing and enthusiastic consent?

\_\_\_\_\_

\_\_\_\_\_

## REFLECTION NOTES

Use this space for any thoughts, feelings, or realizations that came up while completing this worksheet.

\_\_\_\_\_

\_\_\_\_\_

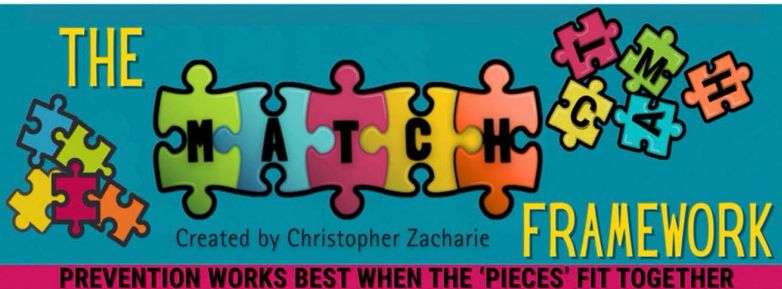
\_\_\_\_\_



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## My Personal Safer Sex Plan

### The Perfect MATCH


*"Plan now, so protection feels natural later."*



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## M = Medications

Medications am I using or considering?

- ☐ PrEP for HIV prevention
- ☐ PEP for emergency HIV prevention
- ☐ Doxy-PEP for bacterial STI prevention
- ☐ ART (if living with HIV)
- ☐ Hormonal birth control
- ☐ Emergency contraception

My medication plan:

Barriers to accessing medications:

1 of 3

## A = Awareness

What do I need to know about my status and my partners' status?

My Testing Schedule:

- Last HIV test: \_\_\_\_\_
- Next HIV test: \_\_\_\_\_
- Last STI screening: \_\_\_\_\_
- Next STI screening: \_\_\_\_\_

My Status:

- HIV status: \_\_\_\_\_
- STI status: \_\_\_\_\_
- Last updated: \_\_\_\_\_

Partner Communication:

- ☐ I discuss status with partners before sex
- ☐ I ask about recent testing
- ☐ I disclose my own status
- ☐ I need to work on this

My awareness goals:

## T = Tools

What physical tools do I use for safer sex?

Barriers I Use:

- ☐ External condoms
- ☐ Internal condoms
- ☐ Dental dams
- ☐ Gloves/finger cots

Lube I Use:

- ☐ Water-based
- ☐ Silicone-based
- ☐ I need to get lube

Toys:

- ☐ I use toys and clean them properly
- ☐ I use barriers on shared toys
- ☐ I check that toys are body-safe materials

Where I Keep My Tools:

What I Need to Stock Up On:

2 of 3

## C = Communication

How do I communicate about safer sex with partners?

My Communication Strengths:

My Communication Challenges:

Scripts I'll Practice:

Boundaries I Need to Set:

## H = Habits

What daily and weekly habits support my sexual health?

Daily Habits:

- ☐ Take PrEP at the same time every day
- ☐ Check in with my body and emotions
- ☐ Practice self-care routines

Weekly Habits:

- ☐ Restock condoms and lube
- ☐ Clean toys
- ☐ Reflect on recent sexual experiences

Monthly Habits:

- ☐ Review my safer sex plan
- ☐ Schedule testing appointments
- ☐ Check in with partners about boundaries

Every 3-6 Months:

- ☐ Get tested for HIV and STIs
- ☐ Update my safer sex plan
- ☐ Refill PrEP prescription (if applicable)

Habits I Want to Build:

3 of 3