

BASSER COLLEGE

WELLBEING WISDOM

Welcome to Basser's Wellbeing Wisdom!

This is your 'how-to' survive college, but, like, the serious stuff.
It's the stuff you think you should know, but don't know who to ask,
or the stuff you know you should know, but asking is a little scary.

Fear no more, we've got your back.

Created by the 2022 Communities and Charities Team

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Mental Health Support

The most important thing is that you ask for help when you need it. The Wellbeing Officers and the RF's and SF's are all here for a chat and a coffee anytime. Definitely send any of us a Facebook message or come say hi.

The Wellbeing Team:

Elle Eivers	Ebony Nicholas	Abe Mahlab	Isabelle Duff
Room 528	Room 306	Room 316	Room 518
STRENGTH: Limitless motivation to drink milk	STRENGTH: Plants	STRENGTH: Rick and Morty References	STRENGTH: Tractor size
WEAKNESS: Processing milk	WEAKNESS: Blending in with plants	WEAKNESS: Skittles	WEAKNESS: Actual Size
Communities and Charities Director	LGBTQIA+ Support	Male Identifying	Female Identifying

Feel free to ignore the last row, talk to whoever you feel most comfortable with :)

Wellbeing Form:

To chat with any of the well-being officers you can also fill out the form below.

[Contact the Wellbeing Team](#)

RF's and SF's:

NAME	ROOM	MOBILE	EMAIL
RF Guy Barker	136	0457272045	g.barker@student.unsw.edu.au
RF Harry Evans	236	0401849530	evansharry@gmail.com
RF Jamie Lau	336	0420378057	z5230552@unsw.edu.au
SF Emma Collins	430	0421451784	z5312120@unsw.edu.au
Dean Samantha Boyce	429	0404064786	s.boyce@unsw.edu.au
Deputy Dean Alessandro Ciuffetelli	529	0415719671	z5213888@unsw.edu.au

Booking an Appointment with the UNSW Psychology and Wellness Team:

- 1.) Follow the Link to the UNSW Website to book an appointment online:

[UNSW Psychology and Wellbeing](#)

OR

- 2.) Book an appointment at the UNSW Health Clinic to get a referral.

To book at the health clinic follow the link [UNSW Health Clinic](#)

This gives you a chance to talk to a Doctor who can then refer you to the Psychology and Wellness team. It can help get you set up with a counsellor the Doctor thinks would be good for you.

OR

- 3.) Download the Appointuit App, to make appointments with your regular practitioner.

If you would like to see a Mental Health Professional but are finding booking an appointment hard, ask a friend or one of the Wellbeing Officers, or an RF or SF or Sam to give you a hand.

Online Support Services:

If your life or somebody else's life is at risk, call: 000

Life-threatening situation on campus? Call Security: 02 9385 6666

After hours UNSW Mental Health Support

1300 787 026

Lifeline

13 11 14

Beyond Blue

1300 22 4636

Online Chat:

[Beyond Blue](#)

Reach out Forums

This site allows you to anonymously post about anything and get a proper reply from one of their employees.

[Reach Out Forums](#)

Head to Health

A government site that helps you find the right online support or resources

[Head to Health](#)

The most important thing is that you get the support you need.
Talk to one of the Wellbeing Team, an RF or SF, Sam, Alessandro, a friend, literally anyone you are comfortable talking to.

Physical and Sexual Health

Worth noting/FAQ:

- You can find condoms in each floor commo
(Note: please replace them if you use them...)
- All appointments with UNSW health are **completely confidential and the health service does not link or share your personal records with the university.**
- If you haven't ever used the health centre before you will need to make a profile upon booking the first time.
- Domestic Students: Appointments are bulk billed with a Medicare card.
 - <https://www.student.unsw.edu.au/health/domestic>
- International Students: if you are currently enrolled and are covered by an Overseas Health Cover (OSHC) that UNSW Health can directly bill, there will be no cost to you or your immediate family for seeing a GP.
 - <https://www.student.unsw.edu.au/health/international>
- The UNSW Pharmacy is located across the quad from Basser (open 9am - 6pm weekdays)
- Birth Control, including Condoms and the Pill (with a prescription), can be accessed at the Pharmacy. The IGA on lower campus sells condoms too!
- UNSW Health centre doctors, nurses and other staff are very approachable! There is no need to be afraid about seeking health information and support when you need it.

Booking with the health centre

To book either a telehealth or face-to-face appointments you can either:

- Call 02 93855425
- Book a time using <https://widget3.appointuit.com/627> which covers these categories... basically everything (see image)

✓ -- select appointment type --
COVID testing ONLY
STI Testing
Telehealth Consultation (video)
Telephone Appointment
Standard Appointment
Long Appointment
Mental Health Consultation
New Patient to Practice
Childhood immunisation
Test Results
Vaccination Only-*Not for flu vaccine or COVID
Script / Referral
Immunisation Travel
Antenatal
Immunisation < 4yrs
Chronic Disease Mgmt.
PAP Smear
Health Assessment
Skin Check

CONSENT LABS

Your Free Guide to Contraceptives

What's a contraceptive?

Contraceptives are methods to **deliberately prevent pregnancy**. This concept is little different to "safe sex" - which is protecting yourself and others from STIs. Unless you have decided that now is the time for children, making sure that you're considering birth control is important. And whether or not pregnancy is a concern for you you **must always protect yourself against STIs**.

Ok, so what's an STI?

Ok so whether or not pregnancy is a concern, you should always be practising safe sex. **Sexually Transmitted Infections** (a.k.a STIs) get passed through blood, saliva, semen or vaginal fluids, which means **it can be transmitted during sexual contact** like kissing, fingering, oral sex, anal or vaginal sex. Common STIs you might have heard of include: Chlamydia, Gonorrhoea, Herpes, Syphilis or HIV/AIDS.

Remember, only **barrier methods work against STIs**. That means using physical things to prevent any transfer of fluids. Some common barrier methods include: condom (both female and male) and the dental dam (sheet placed over genitals or anus when performing oral sex).













So, contraceptives can prevent pregnancy. How?

Check out this great video from [Planned Parenthood](#).

The main takeaway is that pregnancy happens when sperm meets a mature egg inside a female's uterus. How do contraceptives play into this? Well, contraceptives essentially **limit the chances of either a sperm entering a uterus or an egg from leaving an ovary.**

Now, let's talk contraceptives.

We've put together some info on the most commonly used contraceptive methods. We've made a quick summary below for your reference, but keep reading for more juicy details on each one.

			
External (male) Condom		\$\$\$	STI
Internal (female) Condom		\$\$\$	STI
Birth Control Pill		\$ - \$\$\$	STI
Depot Injection (Birth Control Shot)		\$ - \$\$\$	STI
Implanon		\$\$ - \$\$\$	STI
Intra-Urinary Device (IUD)		\$ - \$\$\$	STI
Emergency 'Morning After' Pill		\$\$\$	STI



'Female'* figure
If this is coloured, the contraceptive is for 'females'*



'Male'* figure
If this is coloured, the contraceptive is for 'males'*



Cost
If this is coloured, the contraceptive costs are low (\$), medium (\$\$) or high (\$\$\$). Some stipulate a range, but the rating is always a maximum of \$\$\$.



Sexually Transmitted Infection (STI)
If this is coloured, the contraceptive protects against STI's
*This is referring to biological sex. However, we acknowledge that gender is fluid and others may identify differently with their sex.

CONSENT LABS

02 | Your Free Guide to Contraceptives

Barrier Methods



External (male) Condom



First off, and most commonly used, is the **condom**, which is a **barrier** method. The male condom is essentially a thin, stretchy pouch that goes over a penis to collect semen.

The Yays The really great thing about condoms is that they're super cheap and easily accessible - you can get them at places like the supermarket or convenience stores. There are lots of great flavours and types - ribbed, glow in the dark, strawberry flavour etc, so the myth of 'using condoms bg make you feel less' is irrelevant.

The Nays Male condoms are 98% effective **but** because of poor application it is actually 80% effective, which means that it is a pretty good idea to use them in combination with other forms of contraception.

Things to know If a condom isn't used, and the male **ejaculates inside** the female, then the likelihood of pregnancy is increased, and it's probably best to get a morning after pill.

If a condom isn't used, and the male **ejaculates outside** of the female, the likelihood is decreased. **HOWEVER**, there is a small chance that pregnancy can still happen. This is because males can have "pre-cum" - which is a small amount of semen that comes out before the big event. It does contain sperm, so pregnancy can still occur.

Source: Health Direct

Internal (female) Condom



The internal **condom** has the same properties as the male condom, but is larger and placed in the vagina or anus instead.

The Yays If your partner does not wish to use a male condom but you want protection against STIs, the internal condom is a great alternative. They are available at most pharmacists, Family Planning centres and online.

The Nays Internal condoms are 95% effective, **but** because of difficulty inserting, it is actually 79% effective, which means that it is a pretty good idea to use them in combination with other forms of contraception.

Non-Barrier Methods



Birth Control Pill



Next up we have **birth control pills**: these pills contain hormones, they come in a pack and you take 1 pill every day. You need a prescription from a doctor to get birth control pills, but you'd want to visit them either way because there are a few different types out there and some might be better suited than others: Combined Oral Contraceptive Pill (oestrogen and progesterone) or the Progesterone-only 'Mini Pill'.

The Yays Easy to get from your local pharmacy, they'll have it in stock. The pill is really great because it's 99.7% effective if used perfectly. So it's a good option for you if you're not forgetful and are happy to take it at the same time every day. There are additional pluses, and some pills can help regulate your periods, reduce heavy periods and treat acne.

The Nays Not a great option if you are forgetful, or don't want to take it every day at the same time. It also **does not** cover STIs. Different types of pills can cause side effects. For some, the pill is not the best option due to potential negative health effects such as migraines or clotting disorders. It's best to check with your GP! Side effects can include weight gain in 30% of people and long-term effects such as osteoporosis.

Things to know The price range for contraceptives vary greatly, so ask your doctor if the type they're prescribing has a 'pharmacy-brand' if you prefer a cheaper alternative. The placebo pills in your packet (they are usually white and this is when you have your period) do not contain active hormones and are purely there to help keep you in the routine of taking a pill everyday. There are lots of different combinations of active pills and it may take a few tries to get it right! Everybody is different and needs different combinations to prevent ovulation.

Source: *The Royal Women's Hospital*



Depot Injection



Another option is the depot injection (**birth control shot**) which contains a hormone called progesterone. It lasts for 3 months, and is given by a doctor. It costs between \$26 to \$34 depending on what type you get and if you have Medicare or not.

Source: *Family Planning Victoria*

The Yays When used perfectly, it's effectiveness is about 99.6%. It can be done at a health clinic. It can help decrease the heaviness of vaginal bleeding (50% have no bleeding at all), and also make periods less painful.

The Nays Similar to the pill, in reality, the shot is about 94% effective, usually because people aren't good at timing when they should get their next shot. It can also lead to weight gain in 30% of people.

Things to know If you forget to get your next injection on time, you have until 14 days from when you were due to get your next. Otherwise, you must use a condom (or other barrier method) until 7 days after your next injection.

Source: Planned Parenthood



Implanon

👤 | \$\$\$-\$\$\$\$ | STI

The **implanon** is a tiny rod about the size of a matchstick that is inserted under the skin of your upper arm by a doctor. It contains a hormone called progesterone that is slowly released over a period of three years. You do need a prescription for this.

The Yays It's up to 99.9% effective. It is a good 'set and forget' option and doesn't require you taking a pill at the same time every day. It can also help to reduce the heaviness of your period.

The Nays If you have Medicare it is \$30, without Medicare it costs \$215.

Things to know Once inserted, the Implanon rod can usually be felt under your skin. Some people may not prefer to feel their contraceptive device.

Source: Family Planning Victoria

Intra-Uterine Device (IUD)



👤 | \$-\$\$\$\$ | STI

The **IUD**, or intrauterine device, is a small "T shaped" device that is inserted into your uterus by a doctor. There are two types: Copper IUD or Hormonal IUD (Mirena or Kyleena)

The Yays The IUD is up to 99.8% effective. Similar to the implanon it's also a long term solution and depending on which type you choose, typically lasts for five years.

The Nays Getting an IUD inserted is more invasive than the other contraceptives. For those who have never had a baby before, since the cervix has never stretched, it may be painful to insert. Some doctors recommend that these people have it inserted under anaesthetic or sedation.

Source: The Royal Women's Hospital

The Nays cont.

Side effects are the biggest cause of discontinuation, and include consistent bleeding or spotting. The good news is that this usually decreases after 6 months, you just have to persevere!

Things to know

Once you get an IUD you will be given a card that informs you when you need your IUD replaced.

Sometimes it can take a while for your hormones to regulate on the IUD. This is completely normal!

The Mirena IUD is also very good at reducing heavy periods over time.

The Mirena IUD may be expensive upfront, but are extremely cost effective over the long term.

The Kyleena IUD is similar to the Mirena IUD, except it is slightly smaller and hence may be a better option for women who have not had babies before. However, it can cause more spotting.

The Copper IUD can actually be used as an emergency contraceptive up to seven days after an episode of unprotected sex!

However, The Copper IUD is not known to reduce bleeding, unlike the Mirena.

Source: The Health Department



Emergency 'Morning After' Pill



We know the world isn't perfect, things happen and either you forget to use contraceptives or you're worried that they didn't work like they were supposed to. Don't worry, you still have options because pregnancy doesn't happen right after you have sex. Sperm can live inside your body for **up to 5 days after sex**. If you ovulate during that time, the sperm can meet up with your egg and cause pregnancy.

Morning-after pills work by temporarily stopping your ovary from releasing an egg. You can access this at a pharmacy, with no prescription needed, and it works for up to 72 hours. The prices do range depending on the brand and type of emergency contraceptive pill, but it will be somewhere around the \$15-50 mark.

Source: Family Planning Victoria

The Yays

There's a common myth out there that it's bad to take the morning-after pill too often. This is completely inaccurate - you can take the morning after pill whenever you need, it won't hurt you. However it's not a good idea to use the morning-after pill as your regular, go-to method of birth control because: taking the morning-after pill over and over again is more expensive and it doesn't prevent pregnancy as well as other forms of birth control as it's only about 85% effective

The Nays

The longer it has been since the episode of unprotected sex, the less effective the emergency pill is so it's important to get on top of this ASAP.

Things to know

Remember the Copper IUD can be inserted up to seven days after unprotected sex

If you still have questions regarding contraception or sexual health some good websites you can access are:

- <https://www.betterhealth.vic.gov.au/health/healthyliving/contraception-choices#choosing-the-right-contraception-for-you>
- <https://www.thewomens.org.au/health-information/contraception/your-contraception-choices>
- <https://www.1800myoptions.org.au/information/contraception>

Unanswered Questions?

Feel free to ask any returning residents since almost everyone at one point or another has used the health centre. You can also speak/message to any of the well-being team, Sam Boyce or floor RF's/SF's.

Lastly, it's worth mentioning that these positions are taken up by approachable and caring people, so just ask if you need anything!

Consent and Sexual Misconduct

Basser, TKC, and UNSW Colleges as a whole take consent education very seriously. It is important that the place you're living should feel safe and welcoming - a place where you are able to feel like yourself!

For those reasons, Sexual Misconduct has serious repercussions for all involved. It's important that all residents at UNSW are aware of and understand proper consent, and how to seek support when things do arise.

Glossary:

Consent

Consent is an agreement between participants to engage in sexual activity. Consent should be **clearly and freely communicated**. A verbal and affirmative expression of consent can help both you and your partner to understand and respect each other's boundaries.

Consent **cannot be given by individuals who are underage, intoxicated or incapacitated by drugs or alcohol, or asleep or unconscious**. If someone agrees to an activity under the pressure of intimidation or threat, that isn't considered consent because it was not given freely. Unequal power dynamics, such as engaging in sexual activity with an employee or student, also mean that consent cannot be freely given

[More About Consent](#) (Rainn.org)

Sexual Misconduct

Sexual misconduct is **any sexual act or behaviour that a person does not consent to**. It can take many forms, including sexual assault (rape), unwanted oral sex, and kissing or touching a person's body in a sexual manner, without their consent. It can also include an unwanted sexual act towards another person, or making a person perform a sexual act that they don't want to do.

Sexual misconduct **can happen to people of all ages, genders and sexualities**, within or outside a relationship. Sexual misconduct is an abuse of power, and is never the fault of the person who experienced it.

[More Information about Sexual Misconduct](#) (1800 RESPECT)

Sexual Harassment

Sexual harassment **includes unwelcome sexual advances, requests for sexual favours, and other verbal or physical harassment** of a sexual nature in the workplace or learning environment. Sexual harassment does not always have to be specifically about sexual behaviour or directed at a

specific person. For example, negative comments about women as a group may be a form of sexual harassment.

[More About Sexual Harassment](#) (Rainn.org)

Sexual Assault

Sexual assault can take many different forms, but one thing remains the same: it's never the victim's fault.

The term sexual assault refers to **sexual contact or behaviour that occurs without the explicit consent of the victim**. Some forms of sexual assault include:

- Attempted Rape
- Fondling or unwanted sexual touching
- Forcing a victim to perform sexual acts, such as oral sex, or penetrating the perpetrator's body
- Penetration of the victim's body, also known as rape

[More About Sexual Assault](#) (Rainn.org)

Rape

Rape is a form of sexual assault, but not all sexual assault is rape. The term rape is often used as a **legal definition to specifically include sexual penetration** without consent.

[More About Rape](#) (Rainn.org)

Force in a sexual context

Force **doesn't always refer to physical pressure**. Perpetrators may use emotional coercion, psychological force, or manipulation to coerce a victim into non-consensual sex. Some perpetrators will use threats to force a victim to comply, such as threatening to hurt the victim or their family or other intimidation tactics.

If force is used to pressure a person into a sexual act, they cannot give consent.

[More About Force](#) (Rainn.org)

Stalking

Stalking is a **pattern of repeated and unwanted attention, harassment, contact**, or any other course of conduct directed at a specific person that would cause a reasonable person to feel fear. Similar to crimes of sexual violence, stalking is about power and control.

[More About Stalking](#) (Rainn.org)

Bullying

Bullying is an **ongoing and deliberate misuse of power in relationships** through repeated verbal, physical and/or social behaviour that intends to cause physical, social and/or psychological harm. It can involve an individual or a group misusing their power, or perceived power, over one or more persons who feel unable to stop it from happening.

[More About Bullying](#) (National Centre Against Bullying)

Stealthing

Stealthing is the act of **non-consensual condom removal**, it is when a

male partner removes or purposefully damages the condom during sex without their partner's clear consent.

It is a form of rape.

[More About Stealthing](#) (Love is Respect.Org)

It is important to recognise that anyone can experience or perpetrate sexual misconduct, regardless of their gender or sexuality. Seeking support about, or reporting Sexual Misconduct will be taken extremely seriously, regardless of who you are.

For more information and examples about what Sexual Misconduct can look and feel like: [1800 RESPECT](#)

How to Report Sexual Misconduct:

1. The Wellbeing Team:

If you would like to speak to any of the Wellbeing Team; Abe, Ebony, Isabelle, or Elle, fill out the form below. If it is easier for you to just shoot us a message or knock on our door that is perfect too.

We can help you make a report, help you access support services or just be there to listen; whatever you need.

[Contact the Wellbeing Team](#)

Elle Eivers	Ebony Nicholas	Abe Mahlab	Isabelle Duff
Room 528	Room 306	Room 316	Room 518
Communities and Charities Director	LGBTQI+	Male Identifying	Female Identifying

Feel free to ignore the last row, just talk to whoever you are most comfortable with :)

2. UNSW Sexual Misconduct Portal:

Available at: [Make a Report | Equity Diversity & Inclusion - UNSW Sydney](#)

The Portal Includes:

- **Information** about support services and options available if you have experienced sexual misconduct. This can also be very helpful if you are supporting a friend.

- **A form to report sexual misconduct.** This form can be anonymous if you would like, you can put as much or as little information into it as you want. It allows you to select what action you would like to be taken by UNSW, including:
 - Contact you and let you know what options are available for you
 - Provide you with details on specific support services available to you
 - Discussion with you about minimising contact between the persons involved
 - Refer you to an appropriate UNSW business unit to assess if an investigation under relevant UNSW Codes/Policies/Procedures is available
 - Provide you with information to apply for Special Consideration because the incident has affected your ability to complete assessments or undertake exams
 - Provide information to assist you to make a report to the police
You can also find a link to making a police report here:
[Sexual Assault Reporting Option](#)
 - Refer you to a legal advice service (e.g., Arc lawyer, Kingsford Legal Centre)
 - No action yet, until you know more about your options
 - Unsure/don't know (I'm reporting this on behalf of someone else)
 - No Action
 - Other
- **Additional available support services offered by UNSW.**

3. RF's, SF's, Dep. Dean and Dean.

NAME	ROOM	MOBILE	EMAIL
RF Guy Barker	136	0457272045	g.barker@student.unsw.edu.au
RF Harry Evans	236	0401849530	evansharry@gmail.com
RF Jamie Lau	336	0420378057	z5230552@unsw.edu.au
SF Emma Collins	430	0421451784	z5312120@unsw.edu.au
Dean Samantha Boyce	429	0404064786	s.boyce@unsw.edu.au
Deputy Dean Alessandro Ciuffetelli	529	0415719671	z5213888@unsw.edu.au

Getting Support/ More Information:

Even if you decide not to report an instance of sexual misconduct, it is super important you get the support you need.

- **The UNSW Sexual Misconduct Portal** has a lot of information about UNSW and public services available to victims of Sexual Misconduct. If you or a friend has experienced sexual misconduct in any form, make sure you check these out to have a better understanding of your options.
[Make a Report | Equity Diversity & Inclusion - UNSW Sydney](#)
- **The UNSW Safety** page has a lot of information about staying safe on campus and UNSW resources. To download the StaySafe@UNSW App follow the link:
[StaySafe@UNSW](#).
[UNSW Safety](#)
- **The Wellbeing Team** is here for you. If going through any of these processes alone is too intimidating or difficult, reach out through our form or shoot any of us a message.
- **Mental Health Support** is available through Uni and online. Check out the Mental Health Doc for how to book an appointment with the UNSW Mental Health Service and for other online resources.
- **Consent Labs** has an amazing website with heaps of information:
[Consent Labs Resources](#)
- **College Staff** are amazing and here to help you. If you need to chat about anything at all, shoot them a message or drop by their rooms.
- **Your friends.** The absolute most important thing is that you talk to someone. If it is all a bit overwhelming, chat with someone close to you to get support. If you would rather they spoke to a Wellbeing officer or made a report on your behalf that is absolutely ok.

LGBTQIA+ Info and Support

Finding your identity and community

There isn't one right way to figure out your identity, and it might not happen for a while, but that's okay! **Sexuality and gender identity are fluid**, so don't get too hung up on labels if it doesn't feel right yet.

You don't have to be in a relationship or have sex with someone to know you are attracted to them (although this is also a completely valid method). You might just end up knowing, or you can talk to others about what you're feeling and ask them questions/advice. The same goes for gender identity; there is no one way to dress, look, or act in order for you to identify as a certain gender.

Here at Basser, we have a lovely LGBTQIA+ community and lots of accepting, understanding people! There is an LGBTQIA+ Basserians chat that you can ask to be added into (just talk to Ebony or another queer friend already in the chat). We are always happy to welcome you into the community :)

If you want support understanding your identity, refer to these links, the '[Queer Question Box](#)' and the '[Mental Health and Support](#)' section further down.

Gender	Understanding gender Identity (Reachout.com)
	Sex, gender and Gender Identity (Planned Parenthood)
	TransHub
Sexuality	Sexual orientation (Planned Parenthood)
	Sexuality (Reachout.com)
	Asexuality (The Trevor Project)

Queer Question Box

For any questions or concerns that you would like to ask but don't want to do so in-person, you can use this google form! **This can be used by anyone, queer or not.** It can be anonymous if you would like. The response will be listed in the Queer Answers doc. It might also be explained at a queer event if you give permission.

[Queer Question Box form](#)

[Queer Answers doc](#)

Coming Out

You also don't have to come out if you don't want to, aren't ready or it wouldn't be safe to do so. And if you would like to come out, there are no wrong ways to do it!

e.g. you could tell them in person, over text, over call, through a letter, on a cake, in a post online, through a friend, by bringing home a partner etc. Consider who you want to tell (parents, friend, family, everyone, doctor) and when you want to - it doesn't have to all be at once.

When you do come out, you may also want to let the person know whether they can tell other people or not. It is completely okay to not want other people to know, as it is your private information and you should be the only one choosing who and when to share it.

If you are outed by someone (whether it was by accident or on purpose), you may want to talk to them personally, or you can contact other support (refer to 'Mental Health and Support' below).

Deliberately outing people can be very harmful and won't be taken lightly.

Coming Out

[The Coming Out Handbook](#) (The Trevor Project)

[How to come out](#) (Planned Parenthood)

[Do I need to come out to my doctor?](#) (Planned Parenthood)

Being an ally

This advice applies both for at Basser and in general!

Stand up against homophobia and transphobia

Even if it is coming from a friend, or isn't around any LGBTQIA+ people.

Homophobia and transphobia are very hurtful to the queer community (even small things); this includes using **slurs, mocking, stereotyping, microaggressions, hateful/disrespectful comments and using incorrect pronouns.**

Be visibly supportive

Attend LGBTQIA+ events!

Support charity events and LGBTQIA+ small businesses if you can!

Consider adding your pronouns to things like your Instagram bio and name tags.

Don't ignore homophobia and transphobia.

Encourage others to be allies.

Be an ally even when you aren't around any LGBTQIA+ people (i.e. still stand up against homophobia/transphobia, use correct pronouns etc.)

Be aware of how you speak

Ask people for their preferred pronouns, even if they present traditionally masculine or feminine, and make sure to use these pronouns. For example,

"Hi my name is Jordan, I use he/they pronouns. What pronouns do you use?"

"How can I refer to you?"

[More on how to use/ask about pronouns](#)

Use gender-neutral language when you don't know something:

"Do you have a **partner**?" rather than boy/girlfriend

"Wow **they** have a cool outfit" rather than she/he

Don't assume everyone is heterosexual or cisgender.

Don't 'out' people who may not want everyone to know

e.g. if a friend just came out to you, don't mention it to others (including their family and friends) unless they have said you can.

If you've offended or hurt someone, make sure to listen, **hold yourself accountable** and take it as a learning experience.

Learn about the community

Ask your LGBTQIA+ friends about their stories and experiences.

Do your own research (youtube, articles, documentaries, studies, books etc).

You can learn about the issues queer people face to get a better understanding of their experience and how you can be an ally - even just reading this doc is a great start :)

Some recommendations:



- [Being a good ally \(general\)](#)
- [Being a good ally \(trans and non-binary\)](#)
- [The difference between gender, sex and sexuality](#)
- [How homophobia hurts us all, and how heterosexism \(assuming straight = normal\) hurts LGBTQIA+ people](#)
- [LGBTQIA+ Aboriginal People](#)
- [The Intersection of LGBTQIA+ and POC](#)
- [15 Things LGBTQIA+ POC want you to know](#)
- [Timeline of LGBTQIA+ Rights in Australia](#)
- You Can't Ask That episodes (ABC show)
- [Transgender](#) [Drag](#) [Intersex](#) [Lesbian](#)
- [Children of Same-Sex Parents](#)

Complete the
UNSW Ally
training

This is a small course on becoming an LGBTQIA+ ally run by ally@UNSW. It is a 2 day course for a total of 5 hours. You can then be listed as an official ally on the UNSW website, and add it to things like your email.

The course is also accreditable as part of the UNSW Student Leadership Program.

[LGBTIQ+ and Ally Training](#)

Sexual Health

More detailed info and advice for sexual health can be found in the '[Physical and Sexual Health](#)' section and the '[Consent and Sexual Misconduct](#)' section, but the following is some more queer-specific notes/sources.

Contraception is still needed in queer sex, but it may look different to non-queer sex.

- [LGBTQIA+ Sexual Health](#) (ACON) including **free safe sex packs** that can be delivered
- [LGBTQIA+ Guide - The Playbook](#)
- [Everything to know about dental dams](#)
- [Sexual Health Info](#) 1800 451 624 (weekdays 9am - 5:30pm)

Virginity is a concept not limited to 'penis-in-vagina' penetrative sex. It can be defined by every person differently, or not at all.

Sexual misconduct and consent apply in the same way to queer relationships as they do in non-queer relationships.

Seeking support will always be taken seriously no matter sexuality or gender identity.

However, getting support for LGBTQIA+ relationships may be difficult due to stigma and lack of awareness/resources specific to queer people. Refer to the '[Mental Health and Support](#)' section below for suggestions on LGBTQIA+ services.

For more information and help with sexual misconduct and consent, see the '[Consent and Sexual Misconduct](#)' section.

Sources

- [What an LGBTQIA-Inclusive Sex Education Looks Like](#)
- [Bish - a guide to sex, love and you](#)
- [The Hookup](#) (Triple J Podcast)

Mental Health and Support

Being queer can come with additional mental health issues and concerns, so the following are resources and support services specifically made for LGBTQIA+ people. The '[Mental Health](#)' section further up also has other general support services listed.

Remember you can always talk to a friend, RF/SF or the wellbeing team.

This year, Ebony is our LGBTQIA+ Wellbeing officer, but feel free to talk to any one of us!

Q-life	Web chat (3pm - midnight) 1800 184 527 (3pm - midnight)
Better Pride	1800 531 919 Website
The Trevor Project	Resource centre The Trevor Space (community for 13-24 y/o LGBTQIA+)
Twenty10	Support Resources
Head to Health	Support for sexuality Support for gender expression
UNSW	List of support and services

Queer Spaces Around Sydney

Day places	Sappho bookstore and cafe The Bookshop Darlinghurst (sells exclusively queer literature) Glebe markets (not specifically queer but the vibes are there) The Rusty Rabbit cafe Rainbow Crossing (nearby lots of cafes, The Oxford Hotel, Universal)
Night places	Chingalings Sappho Bar Birdcage (at The Bank Hotel) Universal The Imperial The Oxford Hotel The Bearded Tit

Glossary

Remember it's okay to not know or understand every LGBTQIA+ term out there, just be open and accepting to learning!

Ally: a person who works to end oppression through the support of & advocacy for a group other than their own

Androgynous: in between masculine and feminine, or a mix of both

Aromantic: a romantic orientation of not feeling romantic attraction/a desire for romance

Asexual: a sexual orientation of feeling less or no sexual attraction/desire for a sexual partner. Some asexual people still have sex or feel sexual desire.

Biological sex: a medical categorization, often assigned on the appearance of genitalia at birth.

Bisexual: a sexual orientation of being attracted to the same and another gender. Is sometimes used interchangeably with pansexual.

Brotherboy: a gender identity of transgender Aboriginal people, usually referring to those who identify as male.

Cisgender: a gender identity that matches the person's assigned sex at birth.

Cishet: a person who is both cisgender and heterosexual

Demisexual: a sexual orientation on the asexual spectrum where a person only feels sexually attracted to someone after forming an emotional bond.

Gay: a sexual orientation of being attracted to the same gender, or of a man who is attracted to other men. Can also apply to non-binary people.

Gender: a social construct used to classify a person as a man, woman or another identity. Separate from sex.

Gender expression: how a person expresses their gender in terms of clothes and behaviour, including feminine,

Intersex: a term describing a wide range of natural body variations that do not fit neatly into conventional definitions of male/female (e.g. chromosome compositions, hormones, sex characteristics)

LGBTQIA+: acronym for lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual etc. Refers to the entire queer community. Variations such as LGBT+ are also used.

Lesbian: a sexual orientation of a woman who is attracted to other women. Can also apply to non-binary people.

Microaggressions: subtle behaviours that communicate negative messages of oppressed identities (whether intentional or not). e.g. saying something bad is 'gay'

mlm: men loving men

Neopronouns: gender neutral pronouns used as an alternative to they/them, e.g. xe/xem/xyr, ze/hir/hirs, ey/em/eir. These have been documented in the English language since the 18th century.

Nonbinary: a gender identity that is not defined by male or female, such as no gender, a mix of genders or androgyny.

Pansexual: a sexual orientation of being attracted to all people regardless of gender or sex.

Polysexual: a sexual orientation of being attracted to multiple genders.

Polyamory: refers to consensually being in or being open to multiple romantic and/or sexual relationships at the same time

Pronouns: language tools used to refer to someone and their gender in third person. E.g. she/her he/him they/them ze/zir

Queer: a term historically used as a slur against LGBTQIA+ people which has now

masculine and androgynous. Separate from gender and sex.

Gender fluid: a person whose gender identity and expression shifts and is fluid between multiple genders.

Gender non-conforming: refers to people who do not subscribe to societal expectations of gender expressions/roles.

Gender queer: a gender identity that falls outside the societal norm of their assigned sex, is beyond gender, or is a combination of genders.

Heteronormativity: attitudes and behaviors that assume gender is binary (just men and women) and only heterosexual relationships are normal.

Heterosexism: prejudice against gay people on the assumption that heterosexuality is the norm

Intersectionality: refers to the way that multiple systems of oppression interact in the lives of those with multiple marginalised identities. Allows us to promote more inclusive advocacy amongst communities.

been reclaimed by many as a form of identity and celebration. Can still be considered hateful when used by non-LGBTQIA+ people in a negative context.

Sexuality: refers to a person's whole identity, including biological sex, sexual orientation, gender identity etc.

Sistergirl: a gender identity of transgender Aboriginal people, usually referring to those who identify as male. May also refer more widely to LGBTQIA+ Aboriginal people.

Transgender (AFAB, AMAB): an umbrella term meaning a person's gender is different from their sex assigned at birth. This includes AFAB (assigned female at birth), AMAB (assigned male at birth), non-binary, genderfluid and more.

Transition: the process of taking steps to live as one's gender identity. May involve hormones, surgery, name change, dressing differently and more. The extent of someone's transition does not change the validity of their gender identity.

wlw: women loving women.

This list isn't comprehensive; for more definitions see [LGBTQIA Resource Center Glossary](#) and [LGBTQIA+ Glossary of common terms](#).

Remember if you have any concerns, take a look at the support resources, and remember there are plenty of Basserians willing to help or answer questions (including those coming from non-LGBTQIA+ people).

Basser is a place for everyone to feel comfortable in understanding and expressing themselves without discrimination!

