



MY FIRST PAP SMEAR AFTER BIRTH TRAUMA

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MY FIRST PAP SMEAR



“ I was at a routine dental visit a few weeks after my daughter was born. I remember being reclined in the chair, the bright overhead light and the scent of latex. Images of surgical masks whipped through my mind. Fear rushed through my body and I shook uncontrollably. My body felt hollow and numb but also heavy and out of control. In that moment I truly believed I was having another emergency c-section.

Based on feedback from our members, women who have encountered Birth Related Trauma (BRT) are more likely to avoid having regular Pap tests. This resource has been designed using suggestions from our members and advice from health professionals to help you navigate your first pap smear after BRT. A special thank you goes to Emma Jensen for her contribution to this resource.

The physical and psychological impacts of BRT can lead a woman to develop mental health conditions such as Post Traumatic Stress Disorder (PTSD), depression and anxiety. In addition to this, they can also develop a sense of mistrust in health professionals. As is reported by many survivors of sexual assault, a way of coping with trauma is to control or avoid things that trigger feelings of their trauma experience.

The Pap smear procedure is invasive in nature to most women, but for many women who have experienced BRT it can induce:

- feelings of vulnerability or helplessness
- memories or flashbacks during or after the procedure
- fear, pain and anxiety
- physical and emotional discomfort
- dissociation.

Nevertheless, with proper support and guidance, you can achieve this important health check. Book an appointment with an appropriate health professional, when you feel the time is right.

Why have the procedure done?

The main purpose of a pap smear test is to detect cervical cancer cells early, so that treatment can start before it spreads and becomes a bigger concern. With this in mind, a positive mindset for having this procedure done, is to put your health and so, the well-being of your family at the forefront. Your family wants to have you around in the future. In Australia, 80 percent of cervical cancers are found in women who are overdue for screening or have never been screened¹.

Reference: <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/self-collection-and-the-cervical-screening-test>. Information provided to ABTA is maintained and stored according to our privacy policy and data storage policies.

Information shared is designed to support, not replace, the relationship that exists between you and your health professional/s.
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What support can I put in place to help me after the pap smear?

Reward Yourself

Be sure to plan a reward for yourself after the appointment. Get your hair done, buy yourself some flowers, do something special with your family or do something special just for you.

Self care

Look after yourself. Eat well, exercise, maintain good sleeping habits, meditate and surround yourself with people you love. Journaling your thoughts and feelings or writing yourself a compassion letter can also help.

Talk about it

Debrief with your support person or book in for additional counselling sessions to talk about it.

A sample script for your first Pap smear after BRT

I'm going to read something to you as I need you to know this before we start. I have PTSD from birth-related trauma. I will need you to explain everything you are doing to my body.

Please don't touch my shoulders or my knees. The word 'sorry' in a clinical setting is also a trigger for me, especially after being touched. Something awful happened to me and that word was used repeatedly. Please try not to use this word.

There will perhaps come a time where I will become overwhelmed. I will say stop. I will need a minute or two to ground myself before we can keep going. Please don't try to talk to me at this time. I will tell you when I am ready again. I will need to hold my partner's hand throughout the procedure.

I might cry. My legs might shake. My breathing might get short and I might dissociate. I want you to know my body as well as my mind but I am determined to see this through. Afterwards, I will need to go outside to get some fresh air. This is a big step for me and I thank you in advance for being accommodating. Do you have any questions for me?

What has worked for some Mums that have experienced BRT?

- Having your baby on your chest
- Lying on your side
- Having your support person hold your hand
- Focusing on breathing to ground
- Having a conversation with your support person while the procedure is being performed
- Inserting the speculum in yourself
- Taking in your own cushion rather than using your own fists
- Booking in a preliminary appointment to build rapport and trust with the health professional and then making another booking to return for the Pap test
- Saying stop anytime you need to. Make sure you take the time you need to regroup.

Will I rebound?

Yes, you will and with time. One step forward can take three steps back. But it's worth doing. Think of your family. Think of you. Think of the alternative of them not having you. That's the reason for rebounding and the reason for why having that first Pap smear after BRT is worth doing.

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What support can be put in place to help me?

Have some control

Select a health professional that you trust, that you feel comfortable with and supported by (this may be your GP or get a referral from your GP to see a gynaecologist). The same goes with the environment in which the procedure is to be conducted. A gynaecologist will often use a chair and it can be less of a clinical setting compared to a GP's consulting rooms. Do not feel that you have to disregard your feelings if someone dismisses your trauma or doubts your questions. If you do not feel safe and comfortable in achieving this procedure with them, leave, regroup and find someone else who will support you.

Support Person

Take someone that will make you feel safe, comfortable and supported throughout the procedure. Due to dissociation with flashbacks and body memories you can talk to them about signs your body will make and what will happen to you before the appointment. Tell them how they can best support you.

Counselling

Talking to a trained counsellor or psychologist who has experience in the treatment of perinatal mental health conditions, specifically around birth trauma can help you plan, prepare and oversee your goals of wanting to have this procedure done. They can also teach you some grounding and breathing techniques and can help you to rebound afterwards.

Keep yourself grounded

By keeping yourself grounded you are trying to keep your body and mind in the present. Wiggle your toes, focus on the touch of holding your support person's hand or look them in the eyes the whole time, say mantras ("I'm safe, I'm here and I can do this" - either aloud or in your head) and use breathing techniques to help keep you grounded.

Manage your expectations

The main expectation of the procedure is to get it done. Do not be hard on yourself. If your legs shake, you cry, you do not manage to get through the whole procedure, be kind to yourself. You were one step closer than what you were the day before. Many put it off for years, so be proud of yourself for making the appointment. Do whatever you need to do to get the procedure done that first time after BRT and the next one. Although it may not be any easier, you know that you can do it.

Medication

Discuss with your GP a possible prescription for medication to relax you before and throughout the procedure. You will just need someone to drive you.

Communication

As hard as it is, you need to communicate your trauma experience. The person you have chosen does not need details, just that you have experienced BRT and that extra care and consideration needs to be given to you throughout this procedure. A script can help you, or an email can be forwarded prior to your consultation. Ask any questions you have and state anything you wish to be avoided in the procedure that may exacerbate the experience. eg. words like "Open your legs."

Have a plan

Write down a list of all the things you expect to happen during the procedure and write an action plan for what you plan to do. Visualisation exercises can also be done to help you prepare for the procedure also.

Have a back up-plan

It is okay to reschedule. It is okay to try again. It is okay to not be okay about having a Pap smear completed. There are more ways women are able to have this procedure done. Ask your GP or gynaecologist about the new DIY alternatives being introduced.

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