

The Trans Men's Pap Campaign



Ayden Scheim CPATH Conference April 30, 2010

The Campaign



- Idea came out of work of Queer Women's Health Initiative on WSW Pap Campaign
- Project taken on by Sherbourne Health Centre
- Campaign guided by a Reference Group of trans men and healthcare providers
- Supported by Community One Foundation
- Campaign launched in January 2010

Survey



- Created an online survey -- 76 trans men from across Ontario (70% from Toronto) responded, providing the data necessary to create the campaign
- 83% reported female sexual partners in last 2 years, 43% reported male partners, 35% reported trans male partners
- Half of respondents age 20- 29, 30% between 30 and 39, 14% between 40 and 49



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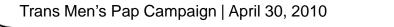
Are Trans Men GetPAPS MATTER FOR TRANS



Of those who have not had complete hysterectomies:

- 55% had a Pap in the last year
- 24% within the last 4 years
- 5% within 5-10 years
- 16% have never had a Pap





Barriers



- doctor said they're at low risk
- emotional and physical discomfort or even trauma associated with pelvic exams
- gender-segregated clinics, transphobia from healthcare providers
- experiences of sexual abuse, assault



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Reasons for GPAPS MATTER FOR TRANSMEN



- Fear of cancer
- Desire to take care of self, stay healthy
- Paps are a part of their healthcare routine
- Trans-positive and competent healthcare providers





Strategies for Getting Paps

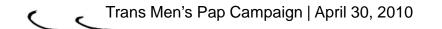


- thinking about something else
- meditation/breathing exercises
- discussing pap at an appointment prior to the test
- having a support person in the room
- focusing on what is happening
- taking a mild sedative before

Respondents Want Providers To...



- be gentle and slow
- talk (but ask if they want to hear about the test or something unrelated)
- have interesting things to look at on the ceiling
- show understanding that paps are difficult for many trans men
- respect the terms they use for body parts



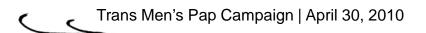
Trans-Specific Concerns



- Hysterectomies- 22% of survey respondents had full hystos (including removal of cervix)
- Some reported being surprised when informed they would still need 'cuff' or 'vault' smears (esp. if history of dysplasia)
- Some experience vaginal dryness from testosterone use, may want or need lube
- Different terminology for gendered body parts- best to ask what terms they prefer







TIPS FOR PROVIDING PAPS TO TRANS MEN

Prepared by M. Potter, RN, BScN LGBT Family Health Team, Sherbourne Health Centre

Split the exam into two parts, with the interview portion of the exam first or even in a separate session than the actual pap test. Try to make the person as comfortable as possible when asking questions that may be difficult to answer. There is no reason to keep them in a tiny gown for this – in fact some people may prefer a sheet to the traditional gown. Additionally, trans people may feel excessively uncomfortable/ vulnerable answering questions without clothing on. It may be helpful to do the pelvic exam and the rest of the physical exam in two separate appointments.

Do not assume anything about a person's sexual orientation or the type of sex that they are having. Some trans men believe that testosterone is a sufficient form of birth control -it isn't and it is important to have frank and open discussions about sex. Questions to engage this type of conversation may include: Do you have a sexual partner? What are the genders of your partners? Are they also trans? Is there a possibility that any of your partners could get you pregnant?

Ask whether or not they have/have had penetrative sex. This may help you gauge a person's comfort during the exam. It may helpful to know this in advance and ask them to try penetration at home first- using a small toy, fingers or even a speculum. Some may be willing to try this, while others will not.



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Building connections. Building health.

4.

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Ask your clients if they want to play with the speculum, see pictures of a pap test, etc. Pap tests and speculums can be scary. It is important to be attentive to the ways that the speculum may add an extra layer of discomfort for trans men. Some – not all – trans men may feel uncomfortable with the idea of penetration, and may feel their gender is undermined by this function of the speculum. It may be helpful to explain why

Let your clients know they can bring a friend or advocate to do things during the exam such as holding their hand or helping them with distraction techniques.

you need to use a speculum.

Using the right words: During the interview portion, ask your clients what words they use for their body parts. Although nonmedical terms such as "front hole" may seem unprofessional to use, these are words that some trans men use to describe their body parts and should be respected during the exam. The terms vagina and labia may be very disconcerting for some, while others will say "it is what it is" and want you to use those commonly understood terms regardless of their comfort with them. Using vague terms such as 'external genitals' or 'internal part of the exam', instead of labia and cervix, may also be preferred. Even using the word "normal" can make people feel uncomfortable. Words like "healthy", "normal for you", and "insert/withdraw" during the exam can be useful. DO NOT say things like: "Everything looks perfect!" or "Now I'm going to penetrate you." This goes for everyone but especially for trans men.