



Vulvar Self Examination

Title My private parts

Target Audience Foreign domestic workers, women

Objectives

1. To introduce activity on understanding the external female genitals.
2. To understand why it is necessary to do simple self examination of the vulva.

Materials White board, flip chart, markers, big drawing of the vulva below (if technology permits a PowerPoint presentation of the graphic would be an advantage).

Time Needed Minimum of two hours, maximum of four.

Instructions

1. Start an unfreezing activity. You may relate to the previous exercises in Action Tool 5-C.
2. You may also start the activity by asking the participants what do they call the vagina in their local languages, The trainer may start to go first, example, Philippines: "puki", "pekpek", "keyyas", Thai: "mod-look", Bahasa Indonesia: va-gee-na, Javanese: memek. etc...
3. Write down the words on the board. (You may hear giggles, laughter or others may just be embarrassed or withdrawn).
4. Ask the participants why some of them were giggling? Others were embarrassed? Others are not comfortable?
5. Ask them what is it in their culture that makes them think that talking about vagina is funny, taboo, dirty, etc.

INPUT:

In most cultures in Asia, cultural conditioning and their religion, families and society prohibits females especially, to talk about their private parts publicly. Some societal factors that prevent women mentioning the vagina:

- To be a virgin when she gets married. That her body is only meant for one man of her life - only her husband.

- The body is the “temple of god” anything to be done inappropriately to the body is a sin (the Christian’s belief). Therefore, touching the body especially breast and vagina is a no-no. It is even worse when women masturbate.
- Only prostitutes, loose women, whores talk about vaginas.
- It is unfeminine, uncivilized to talk about it, etc...

6. Is this conditioning good? What happens now in reality that contributes to the worsening of women’s reproductive rights issues? Trainers may present some statistics here:

WOMEN AND HIV/AIDS: LET’S BE ACCOUNTABLE FOR THE SEXUAL AND REPRODUCTIVE RIGHTS OF WOMEN

Statement of the Women’s Global Network for Reproductive Rights International Women’s Day, March 8, 2006

Globally, there are 17.5 million women living with HIV/AIDS. Women are almost twice as likely to be HIV positive as men, and most of them are young and living in poverty. The Women’s Global Network for Reproductive Rights (WGNRR) believes that, beyond biological components, women’s vulnerability to HIV/AIDS is due to a web of social, economic, political, religious, and cultural factors that kaleidoscopically replicates itself across communities and borders.

Women are trapped in a web of disempowerment that makes it difficult to negotiate safer sex. It makes it hard to access information and services. It can make women the object of blame and discrimination or even violence. It can put women in positions of exploitation at work and in their communities, families, and relationships. It can dispossess them of property and income. It can, and often does, make it harder for them to protect themselves from HIV, and from living positively when they are HIV positive.

7. Tell participants that the session is an introduction to make ourselves comfortable with our bodies especially our genitalia because it is a way of exercising our rights for information and protection on our health.
8. Ask them if they are ready to see a picture of women genitalia? (affirmation of answers are needed here)
9. You may invite a female ob/gyn to explain if they have questions on the scientific functions of the parts of the genitalia.

INPUT:

Why Vulvar Self Exams? The Importance of Early Detection

Women may have early infections or precancerous growths, but may not be aware of changes in the vulva until the disease becomes more advanced. As you would expect, more serious cases require more extensive treatment...which could even mean a major loss of vulvar tissue to survive.

Yet, if caught early, your physician can better treat as well as prevent the spread of infection or growths on the vulva. The key is early detection.

A simple self exam of the vulva is the most important habit you can start now to help you notice important changes in the vulva... changes which need to be reported and discussed with your physician.

Who Should Perform VSE?

All women who are sexually active...and even women who are not sexually active but are over 18 years old.

How Often Should VSE Be Performed?

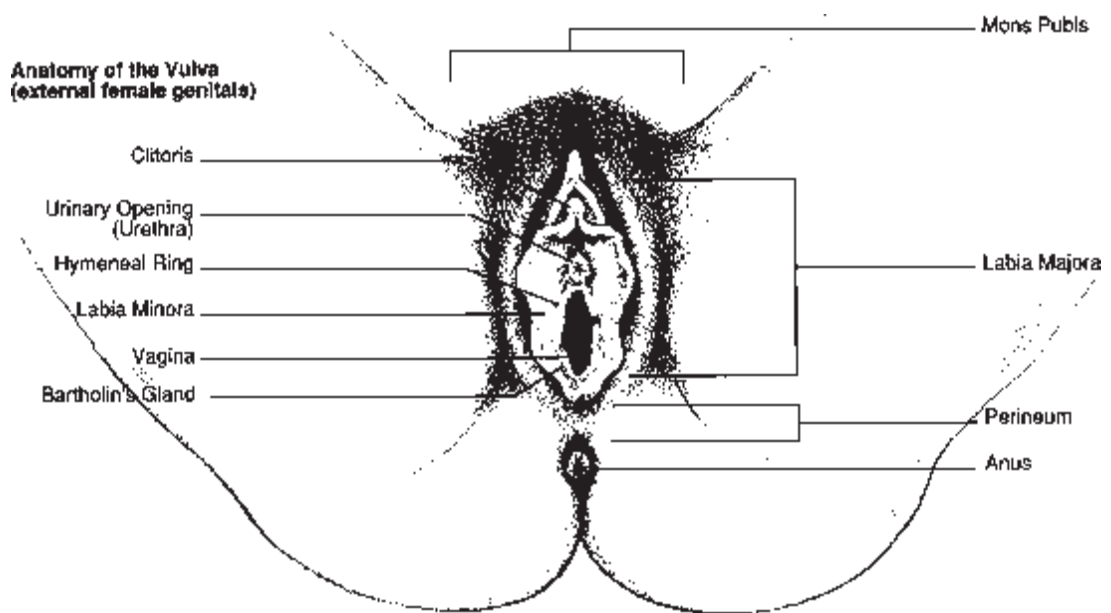
Once a month, just as recommended for breast self exams; or any time you have symptoms related to the vulva. Women with any history of vulvar disease are encouraged to perform vulvar self exams more often. (Vulvar self exams are best performed between menstrual periods.)

IMPORTANT NOTE: MOST CHANGES OR NEW GROWTHS ON THE VULVA WILL NOT BE CANCEROUS...and will need only minor checking and treatment. But, you should report all changes to your physician to determine the best care at the first sign of a problem.

How to Perform VSE... Where To Look

POSITION. Find a comfortable, well-lighted place to sit such as a bed or inside the toilet when you go for shower. Hold a mirror in one hand. Then, use the other hand to separate and expose the parts of the vulva surrounding the opening of the vagina. Once you have a good viewing position, examine the main parts of the vulva as follows:

1. Check the “mons pubis” (the area above the vagina around the pubic bone where the pubic hair is located). Look carefully for any bumps, warts, ulcers, or changes in skin color (pigmentation, especially newly developed white, red, or dark areas). Then, use the finger tips to check any visible change and to sense any bump just below the surface you might feel but not see.
2. Next, check the “clitoris” and surrounding area (directly above the vagina) by looking and by touch.
3. Next, examine the Labia minora: (the smaller folds of skin just to the right and left of the vaginal opening). Look and touch by holding the skin between thumb and fingers.
4. Then look closely at the “labia majora” (the larger folds of skin just next to the labia minora). Examine both right and left just as you did the labia minora.
5. Move down to the “perineum” (the area between the vagina and the anus). Check thoroughly.
6. Finally, examine the area surrounding the anal opening...as before by looking and by touch.



REMEMBER THE BASIC RULE: Vulvar diseases are most easily, safely, and successfully treated when discovered early. Now you know...and now you have yet another good way to help protect your own health...the monthly vulvar self examination...a good habit to start today.

What to Look For

If you find any new growths or changes, report them to your physician as soon as possible. Some examples include:

- A new mole, wart, or growth of any kind.
- New areas of "Pigmentation" (skin color) especially newly developed white, red, or dark skin areas.
- Ulcers or sores, except for any minor injury with a known cause.
- Areas of continuing pain, inflammation, or itching.

10. To end, give them an assignment to examine their vulvas when they go back home. This is to familiarise themselves to the anatomy of their vagina. To those who are familiar with it already is to check it regularly for the above mentioned precautionary measures.
11. The Resource Kit recommends an advance community based "Self Help and Self Exam" by Na Shariram Nadhi, by Sabala and Kranti; page 96-109. This may be a good follow-up activity for this session. Copies are available through Jeanette D'Souza, A-201, Vasant View, D'Monte Lane, Orlem, Malad (W), Mumbai 400064, India.